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MYSTERIES OF MEDICAL LIFE

BY

GEO. ALLARTON.

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MYSTERIES OF MEDICAL LIFE,

OR,

DOCTORS AND THEIR DOINGS.

BEING A

SKETCH OF MEDICAL MEN GENERALLY;

THEIR

MANNERS, HABITS, VIRTUES, VICES, LOVES, HATREDS, JEALOUSIES, ECCENTRICITIES, SUCCESSES, FAILURES, VEXATIONS, AND DISAPPOINTMENTS;

WITH A DESCRIPTION OF

THEIR TREATMENT AND ILL-TREATMENT BY THE PILL-TAKING PUBLIC.

BY

GEORGE ALLARTON, M.R.C.S. & L.A.C.

DEPUTY-CORONER FOR SOUTH STAFFORDSHIRE; AUTHOR OF "LITHOTOMY SIMPLIFIED," ETC. ETC.

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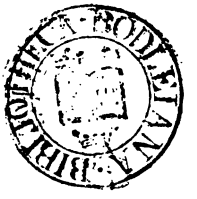
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TO THE

DOCTOR-LOVING, DOCTOR-HATING,

DOCTOR-CHEATING,

DOCTOR-PATRONISING, AND DOCTOR-ABUSING PUBLIC,

These Pages

ARE RESPECTFULLY DEDICATED

BY

THEIR HUMBLE SERVANT,

THE AUTHOR.

The race is not to the swift, nor the battle to the strong, neither yet bread to the wise, nor yet riches to men of understanding, nor yet favour to men of skill; but — time and chance happeneth to them all.— *Eccles.* ix. 11.

PREFACE.

LITTLE has been written about Doctors—much has been said about them, and great is the diversity of opinion respecting them. The *genius* of one man will be the *fool* of another; the *idol* of one, the *derision* of another: and there is perhaps no doctor so *stupid and obtuse* but that some equally stupid and obtuse person can be found to think and call him *clever*. There is one thing, at least, certain, and that is, that the idols of the public—the men who are most sought after—are very rarely professional geniuses, and how they ever came to be idolized or worshipped is an inexplicable mystery. It is not from their bulk or stature alone—for we have tall and short, big and little idols; it is not from temperament, wealth, or birth—for we have nervous and sanguine, rich and poor, aristocratic and plebeian idols. Can it be their superior attain-

ments, or superior intellect? *Take one glance at them, and it will dispel such a vision for ever.* A hundred trivial things may bring a man into favour, practice, and notoriety; and once there, all the world will run after him, and praise him, and worship him, and recommend him, and put their faith in him—even though he be but one remove from idiotcy! Do we not see this done every day of our lives?

Various and amusing are the methods employed by doctors to "get into practice." One will boldly attack the *front door*, while another will go round to the *back*. One will ascend the scaling ladder to the nursery, and by the aid of *lady's maid or nurse* find his way to the *mistress in the drawing-room*. Another will descend the *area steps*, like a hungry policeman, and by the aid of *coachman and cook* find his way to the *master in the dining-room*. Some again will beat about and attack the outposts instead of storming the citadel. Thus one will secure the *clergy*, and take the *churches* and *chapels* by storm; another will *surprise* the *congregations en route;* while another will attack the outlying pickets by dashing among them with smart equipage and livery;

and some again will even condescend to practise a *ruse*, and send an ammunition-boy about from house to house with suspicious-looking canister directed to unknown military officers of various grades.

While sailing with the stream of life, we notice not its moving currents. We travel by a train, but never dream of the gigantic power which drags it on, nor of the signals which serve to guide its course. But if a check occur, we then perceive what complicated cranks, and shafts, and wheels, and springs, contribute to its magic speed; and stand aghast to contemplate the mighty power which whirled us through the air. The fact is—we never pause, nor stop, nor turn to seek the motive power, until misfortune throws us out of gear; and then we scan the varied parts which make life's wheels revolve. Illness compelled me for a time to quit the whirling current of medical life; and I now stand again upon its brink, awaiting the rising of its tide to float me off once more.

While gazing on its ever-restless wave, I have watched, with scrutinising glance, the

various means by which the tributary streams approach the boiling surge; how some will take a winding course, while others rush with noise on each impeding mass, and sweep it onward to the deep. Thus is the stream supplied which floats life's fragile bark, or sinks it in its depths.

It is now nearly thirty years since I entered the profession, and during that period I have seen the career of many a young doctor open brightly, and with every prospect of success. I have seen many disappointed, after toiling on for years. Many have I seen cut short in the flower of life, and just as they were rising to distinction. While others I have seen pursue a tortuous course, as if they had no goal in view. I have seen the young come in—the old go out.

I have seen many who have achieved greatness, and many who have had greatness thrust upon them. I have seen many who have risen on others' reputations. I have seen one reputation destroyed to make another. And I have seen men who have overshot their mark, and in attempting others' ruin ruined themselves.

I have seen many a practice made—many a one lost—and many a one transferred.

With such ample opportunities to judge of medical character, I have ventured to approach that much-debated subject—"*The Country Doctor's claims on public confidence.*"

During the past three years I have resided near to town, and travelled much by rail; and scarcely has a day elapsed without hearing country surgeons derided and condemned. As I have ever found that public opinion when strongly expressed is more or less founded upon fact, I have determined to dissect the doctors and the doctored; and when my knife has "laid the parts all bare," I will leave the public to decide the question for themselves,—whether doctors are not more sinned against than sinning?

As the *subject* which I am about to dissect is not very *fresh*, many will deem it rather offensive, and prefer to let it rot in oblivion: but we owe a duty to others as well as to ourselves to remove as soon as possible *contagious influence*, for the body medical, like the body physical, will only grow the more corrupt;

and as its functions are essential to the public weal, the sooner it "puts on *incorruptibility*" the better for us all. In operating upon this unhealthy subject, I hope I have not been unmindful that "*Operators are liable to the same complaints as those upon whom they operate.*" They should, therefore, cut tenderly, and with discretion. In using the knife, I have endeavoured to keep its *point* as much as possible *from wounding neighbouring parts;* while in operating upon the *upper or superior members* of the body medical, I have been careful not to *cut too deeply* with the *edge:* but I have gone over the *main features* without sparing *edge* or *point;* and I have caustic'd some *little bits of proud flesh* with an unsparing hand. If in these random dissections I have inadvertently wounded a neighbour or a friend, I must crave indulgence on the *score* of *maladroitness.*

"For many a shaft at random sent
Finds mark the archer never meant;
And many a word at random spoken,
May soothe or wound a heart that's broken."

Sydenham, Nov. 1.

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Mysteries of Medical Life.

WHO IS YOUR DOCTOR?

WERE you to meet a West-End swell, draped in a *suit* of Stultz's best, he would consider the time *well-suited* to reply to that familiar question —"Who's your tailor?" But if you chanced to meet a person in a *seedy, ill-made suit*—one of the slop productions of the East—*he* might think the time *ill-suited* to reply; and in *unmeasured* tone demand,—*What's that to you?* Now, in putting the question, Who's your doctor? I have presumed upon my reader being smitten with that fatal drug-devouring mania so common in this land of spleen and bile, of smoke and taciturnity; this land, where every one inquires after everybody's health, and tells everybody he meets how very ill he looks; where every one observes, It is very hot, or very cold —very wet, or very dry—as if everybody else

were senseless, sightless, or impermeable to rain. But perchance the reader, like the seedy-suited man, may simply ask, What's that to you? or make a species of apologetic answer, as if *afraid to own;* or, what is more, may feel *ashamed to tell!*

There is, unquestionably, a something magic in the name of Doctor which touches all the hidden sources of our sorrows and our joys—our loves and hates—our sympathies and fears. It is the peevish child's abhorrence, and the sick man's dread. It revives the horrors of the bitter pill and draught—the fevered tongue—the parched and burning throat—the maddened brain—the dreaded, agonising pang of parting life, with all its soul-awakening terrors! Who has not trembled at the name of Doctor, or gladly hailed its welcome sound?

In using the term Doctor, I employ it in its commonest acceptation—as it is used by all the world: it therefore includes *Physicians, Surgeons, General Practitioners,* and *Quacks.* It is not a little singular that the public should look upon each individual element—each crude ore, which, combined, forms the grand medical amalgamation, as of *equal purity and worth.* Whereas, the metals do not differ more in *relative value, qualities,* and *uses,* than do individual doctors.

Almost every town presents its richer and its rarer specimens—its dashing, plodding, fashionable, and eccentric doctor. Yet they are *spoken of* and *treated* all *alike.*

How constantly we hear that definite expression,—"*Fetch* THE *doctor,*" as if perfectly immaterial which!

It is *proverbial* that doctors DIFFER! Some are highly polished, while others are deficient in the common courtesies of life, and neglect its commonest civilities.

Some are well educated, and deeply skilled in science—others are practical; while some, again, are nothing more than bunglers. Yet they are all invested with equality of power, and all entrusted with the deadliest drugs to wield as fancy leads them: in short, they are all licensed by the law to kill and slay, and if they only do this after the most approved fashion, or *secundum artem,* they are not accountable to man!

"*Who is your doctor?*" is, therefore, a question of some importance. From the loose system of educating doctors,—from the multiplicity of schools, colleges, and examining bodies,—each pursuing its own system, and, from the great variety of examinations, each entitling to a diploma to practise,—a race of medical men has been produced in whom the public have very

little confidence. While one diploma is notoriously the reward of a very trying and superior examination, — another, conferring the same title and equal powers, is as notoriously one of which the owner is ashamed, or, at least, not particularly proud. Thus it is, it has been, and it will be, I fear, for some time to come, a melancholy fact, that every man who calls himself a doctor is not *necessarily* fit to practise medicine, or to be entrusted with the care of human life. Look at the men who daily pass your door, armed with the lance, the potion, and the pill! How *few* of them ride forth to real fame! How *many* gain a worthless notoriety! Some, whom the world regards as prodigies of skill, would scarce pass muster in a grocer's shop! while others, who take "*the cream of practice*," would not be trusted by a West-End draper to serve a lady-customer, or measure out his goods! And is it not sad to contemplate the fearful havoc made with human life—to think of the old and young—the rich and poor—the grave and gay—the prosperous and the wretched —who are sacrificed to fashion or to clique? Does not the blush of shame rise mantling to your cheek when you think how kindred life is sometimes sacrificed to "*mother's pride?*" For youth is not selected for the medical calling on

account of peculiar fitness, or special education, —nor because he has a desire to be a medical man; but because his mother wishes to have a doctor in the family. Hence the Nature-stamped inferiorities we see in every town. Families in the humbler walks of life are prosperous, perhaps, and they then begin to dream of professions for their sons. If they have three, the sharpest is sent to the village lawyer, the mediocrity to the village doctor, and the inferiority to the village parson, with the view, some future day, to fill the pulpit of the parish church. If mamma have two, the sharpest is selected for the doctor; but if only one,—no matter what his feelings or his faculties may be,—he *must* be made a doctor: for physic has ever been a mother's favourite choice.

The embryo doctor is transplanted from the nursery to the village school, where he is made to imbibe a modicum of learning, combining a smattering of Latin and of Greek. At fifteen he is introduced to the village doctor, who, for a moderate premium, undertakes to initiate him in the "art and mystery of an apothecary." His happy and ambitious parents picture to themselves visions of future greatness. Court physicians—serjeant-surgeons—Coopers and Abernethys—flit before them in their dreams; they

see nothing which can prevent the realisation of the bright future, and the days and hours are duly counted to his start in life. Already have his sanguine parents begun to reckon how many of their friends and neighbours they can calculate upon to patronise "the doctor," when he mounts his brazen plate and keeps his horse and chaise. Already have they prepared the road to future greatness by depreciating the old-established men. The period of apprenticeship is spent in pounding drugs and rolling pills — in mortar-washing and bottle-filling — in compound-making and in dressing wounds; — the daily routine of dispensing merely consisting in the preparation of some half-dozen prescriptions, varied with the seasons of the year and prevailing epidemics.

How deluded are the poor confiding parents of our medical embryo! — they imagine that their darling son is planting for the future harvest of his life — they vainly fancy that the village doctor instructs his pupil in "the art and mystery" of drugs and wounds; but what a myth!

As the curtain falls upon this first important act the scene is changed, and the tyro next appears upon the London boards, where he still enacts a part in "The Comedy of Errors;" but the great ambition of a student's life is to take his part in

the popular *Opera* of "Walking the Hospital," which he often does to perfection under the *soddening* influence of tobacco-fumes and stout, or that favourite students' beverage half-and-half.

What an interesting volume would "Foot-prints of Medical Students" make! what scenes of life, and death, and vice, and crime, would it reveal! How often should we trace them to the dens of infamy and vice, the tavern and the hell! How seldom should we find them leading to the church, the hospital, the dying bed! But students are much changed, and hospitals, which years ago sent coach-guards and Jack Sheppards to the world, now send out first-class men. Even the student of the olden time, with all his fabled pranks, must have possessed some sterling traits to have resisted the alluring influence of vice which then beset his path.

It is the astonishment of every one that medical men should make such steady members of society, when we reflect upon their past career and look at the temptations which surrounded them in youth. Only look at the career of an *ordinary* medical student.

He leaves the parental roof at an early age—is early instructed in the mysteries of life, and early familiarised with some of the most demoralising of human vices. He sees, during his pupilage,

much that has a vicious tendency—he is surrounded with temptations of the very worst description.—He arrives in London, to pursue his studies, without guiding hand or warning voice to prevent him swerving from the path of duty and of honour. His parents have, in their ambition, raised him to that proud and giddy pinnacle which lifts him far above their own control,—and, like a ship without a pilot, the wayward student courses o'er the dangerous deep to the quiet haven of his destined port—the wide world's wonder! That he has had much to encounter and much to avoid—that he has been beset by temptation and surrounded by vice—that he has nearly wrecked the hopes of his family over and over again, is not to be wondered at; yet, with the exception of a few senseless and comparatively harmless frolics—this pilgrim of the world—this voyager on life's sea, escapes the rocks and shoals—the snares and pitfalls which have beset his onward course, and sits himself down a respectable and respected member of society, and in many instances an ornament to science. When we look back upon the wild career of a medical student—the rollicking, rioting, uproarious medical student, whose midnight orgies not unfrequently result in a magisterial interview, the payment of a fine, or

the receipt of a severe reprimand — is it not astonishing that the adult or mature animal, the doctor, should ever become a steady or respectable member of society? I will say, that as a body, no men are more humane, more self-denying, none more plundered, more ill-treated, or more derided, than medical men.

As to the education and practical abilities of medical men — what can we expect under the present system? what can we expect when medical life is a mere lottery? when skill and talent have no better chance than ignorance? when men of superior practical attainments live unnoticed and unknown, while glaring mediocrity runs riot amongst life? And is this not the case? Do you not often meet with men engaged in active practice, whose vacant looks would make you pause ere you confided to their care the humblest life which God has given to his meanest creature? If you admit this glaring fact, this common observation of the crowd, you cannot wonder at my question, Who's your doctor? With such uncertainty of qualification as we meet with now in doctors, arising from the unsettled state of medical law — I should strongly recommend you, if you ever meet with a doctor in whom you can confide, to *keep to him*, and use him liberally and well. There is, I am persuaded, nothing

more essential than to avoid a change of doctors. If you change about you are sure to lose faith in physic,—you cannot help it, for every doctor differs in opinion and in treatment: a thing which rather puzzles even sensible people—and would create distrust, but that diseases *will* get well in spite of every treatment. Many people roam about after doctors as they would after hatters, and this is especially the case in large towns and suburban districts. It is no uncommon thing to see two or more doctors attending at one house; it is a very common thing to see a fresh doctor for every fresh illness; and we occasionally see a separate doctor to each member of the family.

In every small town, and nearly every country village, there are from six to twelve medical men —yet we rarely *hear* of more than *two*, and these two have what is commonly termed the *pick of the practice*. This very delightful picking of patients' pockets,—for I presume that is the real meaning of the term,—is not done by "the *most dexterous professionals*," by any means—for dexterity is not needed where the public voluntarily open their pockets *for the especial practice of two men*, and shut their eyes to their maladroitness.

These professionals owe their success to a variety of circumstances unconnected with their *particular calling*,—such as family connexion, local

interest, wealth, patronage, and so forth. These qualifications have to be set against the *genuine* qualification of the remaining practitioners—and this is most ingeniously done by changing the signification of the medical vocabulary and adapting its meaning to required circumstances. Thus:—

A dashing equipage is made to imply		Genius.
Wealth . .	,,	Talent.
Bluster . .	,,	Ability.
Swagger . .	,,	Learning.
Off-hand treatment	,,	Great decision.
Naming a disease at sight	,,	Great perception.
Discovery that another doctor is wrong		Great penetration.
Killing a patient outright	,,	Having left nothing undone.

Thus have these men greatness thrust upon them, and practice running after them; while men of talent sit at home with as bright a prospect of seeing the coming Millennium as coming practice!

We will now inquire what a doctor is; what he ought to be; what he does; and what he ought to do.

First, then, *What is a doctor?* That a doctor is a doctor, is as certain as that one and one make two. That a great many doctors might be taken for anything else is equally certain; and yet there is an *indescribable something* about them

as a class which is very typical, and which bespeaks their mission—a something which leads you to exclaim, "That is a doctor, I am sure!" Now what is this nature-stamp—this "distinguishing characteristic?" Is it the doctor's *dress?* Certainly not: although that is peculiar, and very emblematic of his "grave calling." No. There is a something in the doctor's physiognomy which is most expressive—a mixture of prudence, caution, and reserve—mingled with doubt, and hope, and fear. It is not the *frank* countenance which is produced by freedom from anxiety.—Nor is it the careworn countenance which misfortune wears when softened down by sorrow.—But it is a mixture of physical dulness and intellectual brightness—an *expression* wrought by a deeply-sunken die, stamped with a weight of injustice, disappointment, and neglect. It is the true reflection of the mind within—a mirror of the sentiments and feelings—perpetually jarring and contending with a sense of injury, ingratitude, and wrong.

To say that a doctor is an unimportant member of the community would be ridiculous. To say that he is merely a useful member would be to say too little. To say that he occupies his proper place in society would be to tell an untruth. But whose fault is it that he does not

occupy the proud position for which he was destined? We shall, perhaps, be better able to judge when we have rambled through the scattered facts which I hope to place before you. And the first and greatest fact is, that doctors are of very *humble origin*, a circumstance of no small importance in this title-loving land. Moreover, they are generally *poor*—another circumstance of importance in the eyes of a nation which worships the *golden calf;* and the two combined will go far to account for his false position. Rarely do the sons of the gentry and the higher classes enter upon duties requiring so much self-denial, and so much devotion to the interests of others. *But what is a doctor, and what are his especial attributes?*

By a French writer he is described as "un homme vetû de noir, mettant des drogues qu'il ne connait *guère* dans un corps qu'il ne connait *pas;*" which in English means "A man clothed in black, who puts drugs of which he knows *little* into a body of which he knows *nothing.*" His especial attributes, according to Hufland, are "affability—gentleness—modesty—probity—gravity—contempt of riches—a just appreciation of vital influences—absence of superstition—respect for the Divinity—contempt of death in the presence of duty—and sacrifice of life itself to

save another. Courage, above all things, is essential to a medical man."

The doctor assumes a peculiar garb and peculiar manner—profound wisdom and great learning. He looks mysterious—employs technical words—and writes in illegible characters. He is particularly jealous and envious of his own order, and ever lives in enmity with it. "He approaches a patient with a cheerful air, which inspires confidence; or he steals upon him like an undertaker going to measure him for his last paletot." The science which the doctor professes is at once the most difficult and the most important. It requires great learning—patience—kindness—firmness—self-denial—self-sacrifice, and self-control; and yet it is openly practised by every blockhead in Christendom! There are very few who would not plead guilty to prescribing for an ailing friend—occasionally interfering with the doctor and his treatment; or even advising a friend to turn one doctor off and take another on, as if transacting business with a tailor instead of a member of that noble profession which the celebrated Hufland thus apostrophises:—"God has made you priests of the sacred fire of life. He has committed to you the care of dispensing his most precious gifts—*health* and *life*. He has confided to you, for the

benefit of your fellow-creatures, nature's hidden treasures. Fulfil your mission worthily—not for your own advantage, nor for your own reputation—but for the glory of God and for the welfare of his creatures. The day will come when you will have to render up account. After the service of God, it is the highest mission of man."

And what doctor could read this spirit-stirring appeal to the *amour propre* of his profession, without feeling proud of his vocation? Yet withal, what doctor would be bold enough to affirm that many of the medical men whom we daily see are, or ever were, intended to be *priests of the sacred fire of life*, except by their fond and doting parents?

The man of education and refined feelings, who possesses that self-respect which is the safeguard of his profession, has, indeed, a trying and difficult task to compete with some of these mediocrities, who resort with impunity to the thousand-and-one little artifices so effective with the public, and yet so ridiculed by them—for the public are not such fools that they cannot tell what a doctor drives to his next-door neighbour's for—or what he goes to every place of worship for—or why he drives about on Sunday so as to attract the notice of every congregation

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makes the medical profession the object of public ridicule and contempt. Were the respectable and more sensible public to discountenance such practices, instead of merely laughing at them, the doctor would soon cease to imitate the mountebank who promenades the streets and blows the advertising blast from his professional penny trumpet to crowds of ailing, gaping mortals, who rush to see and hear. These acrobat doctors are unjust towards the educated medical man who observes professional decorum, although it keeps him in obscurity.

Is it conducive to a patient's interest that his doctor should be independent of him?

Certainly not. There is too much to try the temper and disgust the feelings. Few independent men would tolerate the peevishness—the petulance—the summary commands—the reproaches—the dissatisfaction—and the gross ingratitude of many patients, to say nothing of the grumbling at the charge for nights of anxious watching and days of thankless toil. Were a man rich, what inducement would there be to witness sorrow—suffering—and death, and to breathe the hot, polluted breath of pestilence?—

M. Depend upon it, poverty is designed by
ence to be the doctor's portion, and that

very poverty is the source of all his real greatness. There are, however, arguments which tend another way;—for instance: How can we expect the man whose brain is everlastingly distracted with life's cares, to find clear thoughts, to reason, and reflect, upon a case of life and death? No man deserves our sympathy more than the doctor. Poor in purse—broken in spirit—bent with anxiety and trouble—he slaves his life away, consoling with a cheerful voice his patient's sorrow, or repelling with his ready hand the onslaught of grim Death. Even when oblivious Sleep, in charity, would spread her mantle over his sinking frame, the hasty summons drags him forth again; and when grey morn awakes the busy world, this weary slave is seen returning to his bed. The well-educated, scientific doctor, is modest in demeanour—thoughtful in appearance—cautious in forming or giving an opinion—careful in practice; he boasts not, and he makes no dash; and although he lives in obscurity and neglect, yet he has the proud reflection of having done his duty and enlarged the boundaries of science. He is free from the stings of an upbraiding conscience. "No busy dreams awake his curtained sleep." "No angry spirits hover round his midnight couch, and cry aloud for

vengeance." But, unfortunately for science and humanity, the medical profession is not wholly composed of such men as these.

It is an extraordinary physiological fact, that doctors, like sheep, are *gregarious*, although they hate and despise each other to the last extreme. But, be it observed to their credit, it is only those who are opposed to each other in practice, and, while opposed, that this feeling exists; for when doctors meet away from the scene of their rivalry, they are no longer rivals, but most excellent and confiding friends—just as contending barristers, who, when in court, are so ferocious that spectators are apt to consider the table which separates them a merciful interposition of Providence to prevent legal homicide, yet leave the court the best of friends, to the infinite disgust of their respective clients, who, with rage depicted on their countenance, generally articulate the words "*a sell*," as if—foolish creatures!—they imagined that a paid advocate accepted their *ire* with the fee.

There are spots in London so densely crowded with doctors that they may not inaptly be called the *Quartiers Latin*, or Latin districts,—a term given to the *locale* of the doctors by our French neighbours,—in honour, I presume, of *canine Latinity*.

These extraordinary regions wear an impenetrable and inexpressible gloom. The tall houses have a sombre appearance—they look like medical mausoleums—while the servants at their doors look for all the world like mutes.

The carriages and horses have a funereal air; and even the spectral trees, which struggle for existence, assume that deadly-lively air which pervades everything in the vicinity of these ministers of death. What can induce doctors to select such gloomy spots to carry on their gloomier vocation? Is it that patients could not possibly retire from such a spot without a feeling of intense relief, or a sudden elevation of spirits, which would not fail to give a false *éclat* to the medical man's renown? Whatever be the cause, certain it is that no places in the world are half so gloomy as the districts tenanted by doctors; unless, perhaps, we except those painful types of an eternal grief—the Inns of Court.

The Latin districts are usually inhabited by a mixture of all kinds, sorts, and qualities of doctors; but it is the *especial* abode of the popular celebrity, who *trades* directly with the public without the intervention of the family practitioner,—much as the inferior brawlers of the bar trade with their unfortunate clients without the intervention of the lawyer.

Indeed the legal profession has its corresponding popularities in the Dodson and Fogs, who luxuriate in the perpetual darkness of such places as Sise Lane and Chancery Lane, and who are down upon every species of sharp practice and rascality with which the ingenuity of "Boz" has so familiarised the world. The inferior order of Latitat and the Old Bailey barrister have ever been notorious for the rough handling of medical witnesses; there is nothing which delights them more than baiting a doctor. Why, it is difficult to tell, unless to be revenged upon the doctor for caricaturing them with his nauseous black draught: for there is unquestionably a strong resemblance between the capped and labelled black draught and the coifed and banded member of the bar, even unto *bitterness*.

When the popular celebrity is consulted by a patient who is under the care of another professional man, his first step is to secure him by setting him against his medical man. He

> "Damns with faint praise—assents with civil leer,
> And, without sneering, learns the rest to sneer;
> Willing to wound, and yet afraid to strike,
> Just hints a fault, and hesitates dislike."

Having secured his prey, vampire-like he sucks the blood of his victim—fanning his fasci-

nation with deceitful words, until health or death release him from his grasp.

These are the men who substitute one name for another—one medicine for another—one diet for another—one colour for another—one taste for another—one anything for another—so that they can but substitute themselves for another. These are the men who get our public appointments by public canvassing. These are the men who cause our hospitals to sink into insignificance, and who damage and break up their once flourishing schools!

The "popular doctor" of the country, and the "popular celebrity" of town, form the superficial layer, or outer crust of the medical globe, —that *shallow* stratum of medical men which meets every eye at every turn, every hour of every day of every year; but it is a very true saying, that "the world knows nothing of its greatest men."

There is a more profound stratum of medical men which meets not the vulgar ken—which delights in its own personal obscurity and scientific reputation—that solid, valuable, and profound layer known only to the more intelligent, respectable, and educated public—that stratum which comprises men of genius—the philosophical—the practical—the scientific—the lite-

rary; — the men who do not trust to all the little tricks of life to earn a reputation, but whose works are known throughout the world and translated into every tongue — men who confer a lustre on their country and their kind. Look at their labours! — everlasting monuments of genius and successful toil! Look at the works of the Hunters and the Bells — the Coopers and the Arnotts — of Abernethy, Lawrence, Grant, Owen, Brodie, Bright, Skey, Addison, Carpenter, Liston, Guthrie, Bowman, Wilson, Little, Hodgson, and such-like men, a dozen of whom are worth all the "*popular celebrities*," and "*cream-of-practice doctors*," in the world.

Medical men, as a class, are very badly remunerated for their services; while some are paid beyond their deserts; and of these I may mention the "popularities" whom I have described above, who rob the general practitioner of his patients by professing superior qualifications, and employing all kinds of specious artifices to impose upon the credulity of the public.

A doctor's bill is notoriously the last to be paid; it is not looked upon as a binding debt, but as a debt of honour; (?) and as his transactions necessarily include all descriptions of people, we may perceive at a glance what chance of payment a mere debt of honour has.

Those who are mean and rich, grumble at the charge—those who are mean and poor, grumble and never pay. It is too much the fashion to grumble at a doctor's bill, instead of gratefully and gracefully paying it. A doctor's bill to some people is even more unpalatable than his physic, and they denounce it as exorbitant without considering its merits;—even the charge of a common journeyman is sometimes objected to by people who wish to be considered as something great. Many people will submit one doctor's bill to another doctor to be taxed, and if the doctors be opponents, the verdict is almost always —"*Charged too much.*" But injustice generally recoils upon its perpetrator, and, as sure as fate, the judged will in his turn be judge. Nothing is so much needed as a Court of Honour in the medical profession to settle little differences—tax bills and adjust disputed claims.

Difficult as it is for the doctor to get remunerated for his toil, yet he is required by the usages of society to keep up a respectable appearance, while the stringent etiquette of his profession forbids him to do anything towards maintaining this appearance beyond putting a *brass plate* upon his door. And what a bitter mockery this is! Why he might just as well put the brass plate upon his coffin-lid at once;

for while waiting helplessly for patients his lease of lifetime may expire, and he may become the tenant of this last and limited abode.

Judging from the want and misery which doctors bequeath to their families, they must be ill-paid, or very improvident indeed. The applications for the vacancies in that truly noble institution, the Royal Medical Benevolent College, have disclosed an understratum of wretchedness and misery, of which neither the public nor the profession had the most remote idea; and which cry aloud for some revision of the present mode of remunerating medical men. The knowledge in time past of the existence of such a noble charity as the Benevolent College would have soothed the death-pang of many a poor and wretched doctor, expiring at his post amid the raging pestilence. It will, in future, incite to deeds of daring and devotion when the destroying angel is again upon the wing, and contagion's hideous form stalks forth across the land. Fear and despair will no longer be associated with the hoarse and whispering voice of cholera, nor the low and muttering accents of contagious fever. The doctor will no longer fear to do his duty lest death should tear him from his helpless, unprovided family. This

institution is a debt of gratitude which the public owed to the profession for its public services alone; and yet it has cost the sighs, and sobs, and tears of thousands to awaken a sufficient interest to raise this stately pile. Mr. Propert, the Founder of the College, has immortalised himself by its happy conception and its successful completion. The medical profession owes him a deep debt of gratitude; and the nation at large must honour a man who has, by his genius and indomitable perseverance, raised a monument which is the admiration of the civilised world. Why *Epsom*, above all other places, should have been selected as the site of a Doctors' College, is somewhat singular, and full of suggestive ideas.

Let me now inquire, Is the *status* of the medical profession lower now than formerly? or is the public better educated? or is science more advanced, that the doctors should be so much derided and received with so much distrust? There is a feeling abroad that medical men are not unwilling to sacrifice life for the basest purposes; and it has been reported that Life Offices look with suspicion upon doctors and their doings. Certainly Palmer's career was calculated to stagger the Life Assurance Offices; but is it not rather too sweeping a conclusion to arrive at,

"*Ab uno disce omnes?*" I was very much struck the night before Palmer's execution with the remarks of some gentlemen in a railway carriage—that *salon des commères.* One remarked that he had changed his doctor, and got in exchange a gentleman whom he did not so well like; but was afraid to send for the one whom he had discharged, lest he should poison him in revenge! His fears and conclusions were at once strengthened by the other three declaring that it was the most impolitic thing in the world ever to employ a doctor whom you had once discharged, for that he was sure to be revenged. Good Heavens! Can humanity really believe in such depravity? Are a lot of little men, who poisonously adulterate every article they sell, deliberately to charge a noble and humane profession with such a fearful crime simply because one doctor, in his capacity of gambler and blackleg, poisoned another gambler, and was suspended for his pains? "How conscience doth make cowards of us all!" If these little men had not been accustomed to deadly adulterations, would they have ever dreamt of such a crime?

Of all *base* things, ingratitude to a medical man is the basest. Many people treat a doctor as they would a petty trader—they try this shop to-day, and that to-morrow; and their

gratitude to a doctor vanishes with the necessity for his aid. The doctor who calls frequently upon his patient is a very kind and a very attentive doctor; but when the bill goes in, he is denounced as an overreaching man. Patients never expect to pay for visits after *convalescence* once begins—they plainly tell the doctor that he was driving by, and only called to please himself. And if he press for payment—why then he called to get his dinner and his wine, and charged the patient for a visit. Many people are rude enough to tell the doctor they have kept a check against his visits and attendance. Whenever a medical man is deliberately and seriously told this, let him go home and charge his highest fee—for his patient has plainly told him that he believes him capable of cheating him: and the best way in which he can resent such an insult is to show that he knows how to estimate the value of his services, and charge for them as well. How completely is a patient at the mercy of his doctor! From the moment he first sends for him his life and purse are in his keeping. The doctor can call when he likes—do what he likes—and charge what he likes—and yet a patient has the meanness to insinuate that the doctor would cheat him of a fee! Patients are generally grateful

during the dangerous symptoms of their malady, but forgetful when danger is past. As convalescence proceeds, gratitude vanishes; and by the time the bill is made out and sent in, ingratitude is all the doctor gets. Were patients to pay their doctor at the time, as Mr. Punch suggests, we should certainly then see that most extraordinary of all sights—a fresh doctor for every fresh illness—soon done away with. Many patients imagine that they wipe out a debt of gratitude by paying the doctor's bill; and when reminded that they are much indebted to their medical man, they coolly reply, "Well, but I paid him what he charged—he has no claim on me!" as if the payment of a few pounds discharged the debt of gratitude for all the doctor's anxieties and responsibilities—his loss of rest and loss of health—his nightly vigils, and his daily toils—for all his hopes, and fears, and disappointments.

No pecuniary consideration can ever reimburse a doctor's wasted hours and shattered health. I have known a medical man submit to the most vexatious inconvenience to oblige a lady at an interesting time. Afraid to leave his home by day—disturbed by every passing sound at night—and all this worry and anxiety for what? A five or ten-pound fee at least? No. But for

one-pound-one, or even less! And when expectation stands on tip-toe for another such event, what do we then behold? Doubtless the same doctor doing the same thing for the same fee? No such thing: but another doctor—and another—and another in succession! Such is human gratitude.

Why, your house-dog would be more grateful for the trifling care bestowed upon him than is creation's lord!

I have often known the greatest services requited with ingratitude; and I have even known a patient seek a cause of quarrel with a doctor to escape the recognition of some act of kindness. The low and grovelling mind is very apt to think it can discharge its debts of gratitude by merely putting the imposing name of Brown, or Jones, or Robinson upon a banker's cheque!

But of all the incomprehensible misdoings of the wealthier classes, the right which they assume to enter the poor man's cottage without invitation or permission, is to me the most unaccountable and the most unpardonable. Every poor man's door should be as much a barrier to intrusion as the rich man's gate. But when the sanctity of home is doubly hallowed by misfortune, suffering, or death—mere curiosity should shrink from lifting up the sacred screen which

hides from human gaze the sorrowing eye. Nothing can justify this thoughtless, impudent indecency, which is daily practised by the rich and vulgar, who assume a right to dictate to the poor whenever affliction or distress has bent them to the earth; but who never darken—even with their shadow—the labourer's door, unless attracted by the wail of sorrow or the gloom of death.

I have seen this curiosity indulged in to a great extent; and I have heard the poor complain of this unfeeling encroachment of the rich—not to afford relief—but to remonstrate on some fancied improvidence or waste. I should be sorry to breathe a word against visiting the helpless and distressed for proper objects and at proper times. I simply raise my voice against the prying curiosity of the ill-disposed, who—in Religion's name—approach the suffering poor, and endeavour to destroy their confidence in the doctor's skill on purpose to suggest some favourite doctor of their own. This leads me to another species of interference with the doctor's vocation—I mean the clerical.

There is in many places, unfortunately, a very bad feeling between the clergy and the medical men. Their respective duties lead them to the same stream—the ebbing stream of life—when

they not unfrequently arrive together. The doctor considering that his patient's interests require that no one should trouble or disturb the stream but himself, leaves an injunction not to allow any one to see the patient without his express permission; on the clergyman's next visit he is duly apprised of the doctor's desire, and too frequently takes offence, and becomes the doctor's bitterest enemy—weakening his influence with patients, and never omitting an opportunity of recommending some other medical man in his stead. Now this is a most undesirable and unchristian state of things, and generally occurs among the more juvenile members of the respective professions—upon many occasions it has even become a public scandal. With the discreet and experienced minister such things never occur, and the well-timed and consoling influence of religion, prudently introduced, will often materially aid the recovery of a patient, by soothing the mind and inspiring additional confidence in the medical treatment. But, beneficial as may be the influence of religion when discreetly introduced by the able, conscientious minister of God, what medical man of experience has not occasionally seen his patient's chances of recovery destroyed, beyond all hope, by the noisy, boisterous, I had almost said blas-

phemous exhortations of certain sects? I have myself witnessed the most extraordinary scenes in the cottage sick-room. What can be more degrading than to see that most solemn of all ceremonies,—imploring pardon for a guilty soul, burlesqued, as burlesqued it undoubtedly is, by these poor, infatuated, and fanatical people? Picture to yourself a dying patient, whose prostrate form, upon the confines of eternity, needs but the shadow of a shock to roll it o'er the brink—every precaution which human forethought could devise has been taken by the doctor to prevent that dreaded agitation of the delicately balanced scales of life. And *then*—picture to yourself,

"Beside the bed where parting life is laid,"

a lank and meagre figure dress'd in black—sitting bestride a chair, his face towards its back—commencing in a low and muttering voice some form of prayer—and then, with growing "accents wild," raising his deep sepulchral voice as if to drown a whirlwind's roar—clutching the chair—gesticulating with wildest energy—stamping, clapping, gasping, singing, raving, sobbing, storming,—and then—swooning from mere physical exhaustion!

The doctor arrives, perhaps, just as this solemn farce is concluded: he draws near to

his patient's bed, and hears from the "last faltering accents" of his lips,—"Doctor—their *noise* has been too much for me."

I have several times entered a house as these men were concluding their fanatical struggles—I have seen them streaming with perspiration and contending for their breath, and upon more than one occasion a *fractured chair* has borne testimony to the fearful violence of that convulsive struggle which is vulgarly denominated "wrestling with Christ." These, of course, are extreme cases, but medical men have almost every grade to deal with; and this, perhaps, leads them into the habit of excluding visitors from the sick-room somewhat too rigidly and unceremoniously. The more thoughtful and influential clergy will, however, make every allowance for the difficulty of a doctor's position.

Officious interference with the doctor's vocation is not confined to the prying curious, and the inferior clergy. There are some medical men, even, who assume greater learning and discernment than their brethren, and who presume to dictate to a doctor through his patient's friends. This system is most indelicate, to say the least of it,—it is an indication either of excessive arrogance, or of a desire to be called in to see the case: but never consent to the latter,

for the presumption, *à priori*, is, that your doctor and your friend's doctor will not agree — and your health or life will be sacrificed to their contentions.

Now as to a doctor's education.

To educate a doctor properly, he should be educated specially — his preliminary studies should all have reference to his future wants — examinations should be strict and long — conducted at the bed-side — in the dead-house — in the laboratory — in the dissecting-room and the museum, and not in a private room. They should be open to the world, that all may judge. With such examinations the public would have a proper guarantee of a doctor's capabilities. And although the fast young man might think the governor's doctor much too slow, and the young lady think him "scarce" genteel enough — yet no imputation could be cast upon his skill.

As things are, a doctor's capability is measured by his carriage and his livery. It is quite time the government took up the subject of medical education, and insisted on a rigid course of study and equality of examination. The ordeal should be such as effectually to prevent stolid ignorance ever entering the lists at all. It is all a bag of moonshine to advocate free trade in physic — to license every stupid lout to "kill and slay," — and

trust to the discernment of the public mind to find him out. The public never stood in greater need of some protection than in these modern days of poisoning and witchcraft. Look at the disciples of the "Leeds wise man," and say if we are ripe enough for universal doctors? Look at the firm belief in *potencies* and *spells*—in microscopic globules and their magic power. Look at the ready ear—open to receive suggestions for the foulest crimes which villany can paint, and answer—Are we ripe for universal doctors? What we need is some commission of inquiry for everything affecting public health and life. No novel treatment should be permitted to be openly practised on the public unless approved by this commission. Even the practice of legitimate medicine calls aloud for some restraint. If a simple pill and draught suffice—why should a doctor be allowed to send his half-pint mixtures and his dozen draughts? It is discreditable to the medical profession to see the doctors' boys from morn till night delivering their filthy trash at every door. You cannot walk along a street or cross a lane without tumbling over some boy, half-page, half-shoeblack, who stops you to inquire—"*Please, Sir, to tell me which is the doctor's stuff for Capt. Grumbles or Lieut. Gripes?*" and opens up forthwith the Pande-

monium lid, and greets your eyes with rows of phials, ranged like time-bleached mummies in a dark sarcophagus. A clever man would never seek the aid of so much trash. Only contemplate the horrible effect of all this filthy physic on the human frame, and can you wonder that the doctor's carriage is always at the patient's door? or only to be superseded by "the well-plumed hearse," which

> "comes nodding on,
> Stately and slow?"

But in legitimate medicine there is a wide difference between the experienced man and the inexperienced one, and their mode of treating diseases does not differ more than their mode of viewing them. Experience can only be acquired at the expense of years—it is the *gem* which medical youth so much despises, and which age so prides itself upon. It is the total of a life's arithmetic—the balance of the sum of our existence, after all wrong figures have been carefully erased, and all additions and subtractions made. And what does this much-vaunted experience really teach us? It teaches rather what to avoid than what to do. Thus, on seeing a patient, *Memory* instantly summons to our aid a host of similar cases—the peculiar course they took,

and the influence of remedies upon them—and Experience decides when it is safe to leave disease to nature—or when it is absolutely necessary to interfere, and how. Thus experience is often able to spare the delicate stomach filthy doses, which inexperience would consider absolutely necessary. It will, moreover, direct us to the most suitable remedy: in fact, it will enable us to detect disease—to seize its distinguishing characters—and to know when it is really dangerous, and when only apparently so. It will point out when to give remedies and when to leave them off. Look at the ease with which the experienced man restores his patient to health—he prescribes little, but has confidence in himself, and inspires confidence in his patient, and he only employs remedies when they will aid and not thwart nature's efforts. Contrast this with the inexperienced man, who drenches, blisters, bleeds, alarms himself and patient—exhibits remedies which thwart nature's efforts, and mistakes their effects for the disease: so that, what with frightening his patient and alarming himself—frustrating and mistaking nature's efforts, and creating symptoms by his pills which he knocks down with his draughts, his carriage may be seen standing, day after day and week after week, at the door of his un-

happy patient—advertising to the gossip-loving world the doctor's incapacity!

But this is the serious side of the picture. Now let us look at the ridiculous side, for every picture has two sides. The doctor, by some strange infatuation, actually fancies that he has cured the disease! and boasts of his triumph. Whereas nature cured the disease in spite of the doctor, and vanquished the doctor into the bargain,—only he was too obtuse to see it.

Before inquiring for what purpose you employ a doctor, I will briefly allude to that weakest and worst trait in the doctor's character—JEALOUSY!—that gnawing, parasitic worm of jaundiced brains, which preys upon the mind, and kills its worldly peace. Its history is the blood-stained page of every nation, and of every age. It pervades alike the court—the camp—the council—Religion's temporal throne—the bench—the bar—the most distinguished men of *science* and of *art*—but which shines forth in the medical profession with peculiar malignity. Look at the trial of that culprit Palmer—whose deeds of blood brought down a nation's curse—and say, was it not jealousy which prompted and supported his defence? Was it not jealousy which pitted doctor against doctor—school against school—professor against professor?

What medical man "did not feel his cheek burn with shame for the profession to which he belonged, as he read day by day the so-called medical evidence brought forward for the defence of William Palmer? Go where you would, the most popular subject for declamation was the conduct of the doctors." It is, indeed, ever to be regretted that the veil of science should have been *drawn aside* to favour such a villain! But jealousy is seen in every word and every deed of doctors, where *doctors* are concerned. One doctor cannot bear to hear another praised, and cannot bear to see another rise.

I will now ask, *For what purpose do you employ a doctor?* So rational is the natural answer to this query, that I can fancy that I hear you say—To cure our ailments, to be sure. But if I may be permitted to express an opinion, I should say that other elements enter into the calculation. Has not the name of the street—the style of the house—the quality of the patient—the number of horses—the cut and colour of the carriage, and the height and tint of the flunkeys, something to do with whom we send for? I think so—and moreover, I believe that these things being all that can be desired, the quality of the doctor is of little importance. Are there not thousands of ambitious people who

would never dream of sending for a doctor who did not drive a pair—attend a lord—or live in some crack street? Are there not many pompous little men who always send to London for a doctor because *it is the thing?*—but such men are only the small-beer of ambition—the flunkeyism of society—the silly imitators of the better class. However, there is no accounting for taste, when people will voluntarily stake their lives at the game of fashion. It is no more than we expect of the higher classes,—but there is something supremely ridiculous in the little men of life, with hearts no larger than a small Geneva watch, assuming that their precious *moments* are more costly than their neighbours' *hours*, and thus require the London wheels and springs to regulate their time.

This leads me to the query, Why are town doctors thought so much more of than country doctors, when their education is the same? And why is the country doctor, when he goes to reside in town, at once promoted to a higher grade? Perhaps it is that—

> "As things seem large which we through mists descry,
> *Dulness* is ever apt to magnify."—POPE.

Do we not find, that if a man of talent take up his abode in the City or the West End, that he

immediately assumes prodigious dimensions? Does not the gaping world look upon him through the magnifying fog and mist with feelings of reverence and respect—or even awe, just as the traveller would gaze upon the spectral monsters of the Brocken? Perhaps it is the magnifying effect of fog and obscurity which makes the London doctors crowd the most gloomy spots which they can find. It confers at once a ready-made greatness, and gives importance. But all are not susceptible of being magnified even into spectral gods, although they seek the gloomiest spots. The men whose carriages we see parading before the country surgeon's door, for instance, would never shadow forth a spectral greatness, even though placed upon the summit of the Hartz itself, unless descried through the opaque and misty lens of ignorance.

Despite her fog-and-mist-enraptured men, London nurses in her sable bosom the greatest and the least of doctors. She can boast the largest number of the skilful and the scientific, and the largest number of uneducated bunglers. Her fame is sought by men from every capital and every clime,—some retain their place, some move onward to distinction,—while others, more boasting than profound, have had to retrace

their steps, and seek a lowlier sphere. Many of our London doctors "were *born to greatness*,"—many "have *achieved greatness*,"—and many "have had greatness thrust upon them." Many derive their fame from long association with the larger hospitals, whose traditional renown is borrowed from such honoured names as Cline and Cooper, Bell and Baillie,—giants of the days gone by! Many derive their position and celebrity from the kindly notice of the press; and, *à propos* of this, how many a profound and shallow SCORE can *trace* a "*Lancet*" origin?

But there are some men who rest their merits on a firmer base, and seek imperishable fame by scientific search. These are the men to honour—these are the men who unravel all the mysteries of life—but these are not the men whose carriages are seen parading before the houses of their country brethren; such great names are quite unknown to the little offshoots of ambition who love to have a London doctor's carriage at their door.

How do you select a doctor? Perhaps there is nothing of equal importance which a man does in such complete defiance of all the rules of self-interest and common sense as the selection of his doctor—although in doing it his happiness or life may pay the penalty! There is, perhaps, nothing of which a man is so hopelessly igno-

rant—of which he knows absolutely *so little*—as the *professional* qualification of a medical man. He will always select the most acute lawyer where his property is concerned,—but where his life is at stake, or the lives of his wife and children, he never troubles himself to seek the most acute doctor,—in fact, he loves to follow some whim, or fancy, or crotchet of his own; and if he think Dr. Smith, or Dr. Brown, or Dr. Jones a good doctor, he will send for him, even though he be the veriest noodle on the earth. One person will delight to have a Court Physician—another a West-End Doctor—while others seek the "*Popular Celebrities*" of the day—or cling tenaciously to the antiquated plodders of their younger days.

If success in practice were a sure guide to a man's ability it would be invaluable—but, unfortunately, it is *too* frequently the case that men who have the largest practice have the smallest brains,—*ability* and *talent* are by no means essential to success in practice—in fact, they often stand in the way of success. The man of talent sees dangers and difficulties which ignorance never sees—he is therefore cautious where Ignorance is bold. An off-hand manner is the very charm of ignorance—but it is inconsistent with safety and scientific talent.

Science is ever learning and investigating, while inferiority is exhibiting and teaching. Patients like to be told the name and nature of disease, whether the doctor know or not. Therefore, while Science is unravelling the mystery—Ignorance is pronouncing its nature and its name. An ill-educated man, for instance, of good personal appearance, starts in practice, and boldly proclaims himself "a *professional phenomenon*"—boasts that he can cure every thing and every one, and has a ready name for every complaint. He captivates by his boldness and confidence, and makes the public believe that his really talented competitors are unfit to carry his shoes. Cases recover or they die; but, unfortunately, they die where they should recover. Parents regret their lost children, and families their lost relatives and friends, in perfect ignorance that they might have been saved by the master-mind and scientific hand. Thus they proceed, dupes and duped—*pari passu*—to the end of the chapter. Thus

"Fools rush in where angels fear to tread."

It is a great misfortune that the world is captivated with the very things which most disqualify a doctor. Thus the world is pleased with the man who decides off-hand, whether right or

wrong—who gives disease a name before he knows its nature. But more: it associates skill with hospital appointments—carriages—horses —large houses and great people—or with noise, bustle, and vulgarity. It reasons, that a man is clever if he keep a carriage; and skilful if he attend the rich.

Incapable as the public are to judge of a medical man, yet, who has not a favourite doctor whom he patronises and recommends—and thinks more clever than his neighbour's doctor?

The fact is, that the only person who can really judge of a medical man is a medical man himself; but envy—hatred—malice—and all uncharitableness, warp the judgment. Hence you can rarely depend upon a doctor's opinion of a doctor, unless he be far removed from all biassing influences. If we really cannot judge by appearances of a medical man's talent—is it not criminal to confide the lives of our children or relatives to the care of a man who *may* be an ignoramus, or even something worse? Are we not bound in conscience to give ourselves some trouble to ascertain the qualifications of a man before entrusting human life to his keeping? Undoubtedly we are: and it is, unquestionably, morally criminal to employ a man simply because

the greengrocer or the shoemaker recommended him; or because he makes a noise and cuts a dash, or purchases another's practice.

But, at the same time, is it not wrong that men should be admitted to the ranks of medicine who are not fitted by education or by natural qualities to practise it with safety to the public?

In publishing the *Mysteries of Medical Life*, I have been instigated by a strong desire to let the light of *truth* into the recesses of the Esculapian temple, which has been for ages standing in the shadow of its own greatness. Its architects and artificers are scarcely known, even by name; indeed the public innocently think that their especial favourites—the "Popular Celebrities," —are the real artificers; whereas they are nothing more than flunkies, who post themselves around its gates—wear its sable livery—and assume the dignified importance of its gods: just as their plush homologies—the Jeameses and the Tummases—assume the importance of their betters. But *Truth*—that moral power of mind's machinery—when pointed as a wedge, can rive the strongest blocks; when twisted as a screw, can insinuate itself in every part; and when armed as a lever, can raise the superstructure from its base, so that the whole may be remodelled and renewed.

Then, why not use the truth to enable us to see things as they are, and not as they appear to be? Only reflect on the proud array of scientific names engraven on the temple walls during the last half-century—men whose works have shed a lustre o'er the globe, while noisy popularities have reaped the harvest ripened by their rays.

It is clear to me, that the sooner the *status* of the profession is raised, the better for doctor and for public. We must hold out inducements to superiorly educated men to join the ranks of medicine. The examinations must be made severe, and more equal—in fact, equality of education at starting is essential. The superadded qualifications will be forthcoming as they are required. The equality of medical education will never stand in the way of a proper distribution of doctors; for instance,—aristocracy would never condescend to tolerate the union or club-surgeon, while the denizen of St. Giles's would never dream of running to Belgravia or Mayfair to fetch the fashionable doctor; yet each would be equally well supplied so far as medical talent and professional acquirement were concerned. Every sensible person likes to employ a medical practitioner in his own sphere of life,—whose habits, feelings, manners, and sentiments, are most congenial with his own, and he

will have the more confidence when he knows that *his* doctor is just as well educated as *my lord's* doctor, or *the squire's* doctor.

The facilities which railways give to the inhabitants of London and large towns to breathe the country air cause numerous families to emigrate into the suburban districts, which are consequently becoming thickly studded with every description of cottage and country villa, to say nothing of parks and mansions innumerable. Tracts of country which a few short years ago were under plough, are now converted into embryo towns, adorned with every conceivable and inconceivable variety of architecture. Roman and Grecian villas,—fantastic wooden cottages,—florid Gothic mansions,—mimic Kremlins, bristling with spire, and tower, and minaret,—and here and there a few half-timbered imitations of the olden time.

Here—in summer—the blanched and wearied citizen transmits his household gods;—here he leads a rude *al-fresco* life, and rends the air with noisy, merry laugh. Here music's thrilling note is wafted on the breeze, as City beauties strain their practised lungs—accustomed to outvie the noise of busy streets. Here, towards evening, may be seen upon the trim and narrow lawn, the merry group, in strange, grotesque

costume—mingled with standard roses—stick-up collared gents—vases, and urns, and plaster notabilities.

Here, too, Vulgarity presides, and scares away the lingering vestige of Gentility. Here—in pompous state—the consequential Cit walks forth in all the pride and circumstance of wealth, and frowns on all who come "betwixt the wind and his nobility."

Here *over-dressed* Humanity monopolises every path, and rudely elbows modest Worth away. Here congregate the *world's deceptions*, marshalled on by Fashion's magic wand. The aspiring tailor—the retiring merchant—the briefless barrister—the crafty lawyer—the pompous city clerk—mingled with rich and rare vulgarities of every nation and of every clime—all ambitious to perform the favourite *rôle* of country squire.

What a jumbling of races and of tribes—of trades, vocations, pretensions, and professions—all in pursuit of fancied greatness! yet how few could represent, with any credit to themselves, even the simplest of the world's distinctions, if attained! Here dwell the mixed and discordant elements which patronise the village doctor, and profess to judge of scientific men, much as they would the texture of a shawl

or fashion of a coat. Here, too, *brass plates* by dozens glitter in the sun, setting forth, in every variety of type, the titles of the healing craft:—"Doctor" and "Mister," "Surgeon" and *et cætera;* and of all the incomprehensible *et cæteras* of life, the *et cætera* on a doctor's plate is most incomprehensible. It smacks of *hidden* things—of *secret* qualities—of *strange diplomas*—and leads the public to believe that the doctor with *et cætera* on his sign is something more important than the rest. With all the display of doctors' plates, we rarely find that more than two men flourish—*the rest exist in name;* and it is to this glaring and universal injustice that I would draw your serious attention. Thousands of wealthy people congregate in the villages round our large towns—doctors by dozens follow in their wake, and—although many are talented, experienced men—yet we never find more than two in each village or small town are enabled to support the respectability of life—and they, by some extraordinary perversity of human nature, are very frequently the least entitled by their knowledge and experience to occupy the proud distinction;—thus is greatness thrust on shoulders unsuited to the weight.

Many people imitate the parson and the squire in making their selection of a doctor—while

others take the opinion of the tailor or the butcher: thus, the parson sends for Mr. Bluster because the squire employs him—the lawyer and the merchant send for him because the parson does—and the little traders and the hangers-on of private families employ him because their patrons do. But the grand registers for doctors in want of patients, and patients in search of doctors, are the village chemist and the monthly nurse. The chemist is commonly looked upon by the public as a branch of the medical tree, or a chip of the *old block*, and is presumed in some mysterious way to understand the relative amount of *pith* and *sap* within the parent tree. But what the *Betsy Prigs* and *Sarey Gamps* can tell of doctors' qualities I am at a total loss to know—unless it be the estimation in which the medical trees were held in the several *nurseries* in which *they* have been employed.

If, however, you wish to meet with the most intelligent doctors in a town or village, you must not listen to popular clamour, nor be guided by popular prejudice, nor popular opinion. If you hear any doctor especially decried, you may at once suspect that he is a dangerous opponent to some other doctor, and that you are conversing with that doctor's friends. The clique, which ever supports and recommends

the men who take the cream of practice, are particularly jealous of any strange doctor who comes upon the scene, and more especially if he be a man of some ability. Remember that men seldom speak disparagingly of those they do not fear.

How, you will say, are we to ascertain who are the men most fit to be entrusted with our lives, if we must neither listen to popular clamour — village chemists — nor monthly nurses? I must confess the difficulty to be great, as the law now stands; but when a public registry is kept of all the doctors' qualifications, and their dates, it will enable the public to make their own selection. As things are, you can but do your best; and I should recommend you to inquire of some respectable professional man of standing, who resides at a sufficient distance to be uninfluenced by that terrible feeling of jealousy which pervades the ranks of medicine. At all events, you should not run to Mrs. Smith's nurse — or Mrs. Brown's cook — or Mrs. Jones's housemaid — to ask what doctor to employ; for if you do, you are sure as fate to have some young or inexperienced man and, judging all from one, you will — as others have done before — condemn *en masse* the country surgeons. This is the reason why you cannot

travel by a train without hearing the whole race of country doctors ridiculed and abused.

But it is most unjust to judge them all from one. Have not the greatest men of modern times been country surgeons? Are there not many of our first-rate men, *now* practising in London, who but a few short years ago were country doctors?

It is too bad to condemn a class of men merely because it contains specimens of the rough-and-ready doctor — the young and inexperienced doctor — and the effeminate mediocrity, who prides himself on tight boots, spotless gloves, and matchless coat, and who turns his nose up in disgust at the unwholesome odour of the patient's room. They are not all like these, and yet they are all condemned as quite unfit to *wait upon* the dog or cat of second-hand Gentility. *Without* this sweeping censure of the thoughtless, the doctor's course is difficult enough. The trials and the tasks of life are not all patent to the world. Many a branching oak — rejoicing in its mighty strength — may have a cankering worm just gnawing at its root; and many a man, with every prospect of obtaining fame, may have his reputation undermined by some repulsive-looking outcast of mankind.

I will now address myself to the pill-taking

public, who exercise, for good or evil, such immense influence over the destinies of doctors. And in employing the word "public," I do not wish to be understood to mean the well-educated man of the world, who ever practises the courtesies of life, and who would not intentionally or wantonly insult or wound the feelings of even the most contemptible of doctors; but I mean that large, important mass of prosperous society, whose wealth outstrips its reason, feeling, and discretion.

The immense power which this portion of the public exerts over the medical profession is most baneful to its best interests. It originates and perpetuates that specious clap-trap doctor whom I designate the "Popular Celebrity," who, if he happen to cure a gouty alderman, is forthwith pronounced to be a fit and proper man to fill the next hospital vacancy;—he is trumped up as a great genius in all the railway trains, and he is soon known to the commercial world as "*the man to go to.*" But Science knows him not—the profession knows him not. He becomes elected to the first vacancy, and fills a post for life which he was never intended by nature or by education to occupy a single day. O Shame! where is thy blush? In vain does the medical press speak out year after year. In vain do the

empty benches in the lecture-rooms testify to the mediocrity of civic choice. His patrons argue, that if he be fit to attend an alderman, surely he is sufficient to attend the poor and half-starved wretch who seeks the comfortable shelter of a public charity.

Will any scientific or rational man be bold enough to assert, that in our large hospitals and dispensaries throughout the country, "the right men are in the right places?" There are many able men, 'tis true,—there are many men, who are ornaments to their profession and the admiration of the civilised world; but there are also many mediocrities—and this will ever be the case so long as our elections are entrusted to those who cannot judge. Look at the mass of hospital-surgeons and physicians—how few have done anything to advance the boundaries of science! The great bulk are mere ciphers in the great medical account. The bitter spirit of rivalry and jealousy which pervades medical men is engendered by this unjust, injudicious, and invidious selection. It is the system—the principle—of which I complain, and not the individual actors. The same spirit prevails everywhere—in the city, in the town, and in the country village. The public will run after the men who make a noise and bustle in the world,

and pass by modest merit. If you are taken ill at the chief inn or hotel in any country town, and ask to have the best doctor sent for, they always send for the man who makes the greatest noise or stir; but if you say,—"Is he the cleverest man?" they as instantly reply,—"Well, sir, there's Mr. So-and-so, who is considered the cleverest man;—but all the principal people have Dr. Bluster."

Now this yielding to public prejudice is cruel, unjust, and most contemptible;—and yet, how commonly is it done! What a commentary on man's independence!—he knows and will admit that Mr. So-and-so is the cleverest man, and yet he coolly and deliberately sends for Dr. Bluster because others do!

I know a village in which two doctors take nearly all the practice, and yet their patients are everlastingly exclaiming against their incapacity. Thus will man immolate his family and friends on Fashion's altar. How is it that we so often find doctors applauded, derided, and employed by the same patients? It is this: First, Fashion rules; and then the doctor's mission makes him acquainted with strange things—it places in his hands secrets too dear to be divulged; and thus many, who would be glad to change their doctor, dare not do so.

These popularities, when once well established, are sure to prosper. Each new-comer sends for them, and each inhabitant recommends them. I never knew but one gentleman who, on going to reside in a strange village, had the courage and the manliness to do justice to the medical profession. He took the trouble to ascertain the practical merits of every doctor; and when illness came, he ordered his servant to summon an obscure practitioner. The horror-stricken girl breathed, and looked astonishment; and at length remarked,—"Please, sir, all the great people in the place have Doctor Swagger." "Very good," was the cool reply; "but I am not a great person, and cannot afford to risk or lose my life to please great people." *C'est le premier pas qui coûte.* I need not say that in a few years after the doctor was *well known* in the village.

Never recommend a medical man from your own individual opinion of him. It is always a very delicate and very invidious thing to do; and if by chance he turn out unsuccessful, you will justly and deservedly be blamed. If you feel an itching to recommend a doctor to a stranger, pause a while, and turn it over in your mind. Think, would it not be wiser and far safer to recommend a tailor in his stead? These thoughtless recommendations are unjust, and often keenly

felt by medical men themselves, who know how little you can appreciate their talent. Many a patient has been sacrificed to this desire to serve a friend. I well remember the case of a young and lovely girl, just budding into womanhood, who was ruthlessly sacrificed to officious ignorance! How self-reproach must embitter that man's life who, by his want of skill, deprives a parent of a child, and sends that child to an untimely grave! Would that the hand of Death, while gathering up the victims of the pill and draught, could brand with some enduring mark the guilty doctor!

These unfortunate cases blight the prospects of the whole profession, and affect them all by implication. The deserving and the undeserving are punished alike; but reproach is more keenly felt by the well-educated gentleman.

It is too bad that bungling ignorance should stick its blunted sting into the more sensitive skin of merit and ability.

> "Fate never wounds more deep the generous heart
> Than when a blockhead's blunder points the dart."

Nothing stings a doctor more than remarks about the length of time his patient has been ill or under treatment; or the fact of death having

been unexpected, or having occurred sooner than was expected.

Many doctors are positively rude when told that Mr. Smith or Mr. Brown, who was ill in the self-same way, was cured in half the time.

Would you be just to the medical man, select him solely on the ground of merit—because he is educated, experienced, and honest. Do this on principle — regardless whether he walk or ride—whether his horse be brown, or grey, or black—his livery green or drab—whether he live in lodgings or occupy a mansion—whether his servant be a little marchioness or a fat and florid flunkey. Do this, I say, and you will do justice to a noble profession, and strike a deathblow at the root of quackery. Reflect for one moment. What can it signify whether your doctor visit you on foot—in a Hansom cab—or in a handsome carriage—provided he bring the necessary ability? I can well remember the time when the doctor was content to occupy the saddle or a simple gig; and I can equally well remember when the close carriage, derisively called a "pill-box," was first introduced. It is now become the measure of professional capacity.

The great world of doctors is divided into classes, orders, and genera, which I shall duly describe.

We have *Physicians*, who sign M.D., and take a particular class of diseases called "*medical*," or "*internal*;" for, as the facetious "Punch" observes, "The faculty has decided that the body has an *inside* and an *outside*, just like an omnibus, the laws of nature with respect to each being different."

Next we have *Surgeons*, who sign M.R.C.S. or F.R.C.S., and who merely attend the *outside*.

Then we have *General Practitioners*, who sign M.R.C.S. and L.A.C., and who undertake the *inside* and the *outside*,—every disease which flesh is heir to, and every accident which skin and bone are liable to meet with.

In describing the various classes of doctors, I shall begin with the lowest on the scale, which is the regularly, but indifferently, qualified GENERAL PRACTITIONER—the man who has just sufficient brains to enable him to pass an easy examination; which ordeal he gets through with difficulty—his success astonishing his fellow-students, and bringing great joy to his anxious but despairing relatives and friends, who duly celebrate the auspicious and unlooked-for event at the Cider Cellars or the Coal Hole.

This man commences practice in the low pestiferous districts, where he exercises his functions among the dirtiest and most ignorant of the

population. He is not a high-priest of his calling, but doubtless fulfils a special mission. His life is not to be envied—it is one everlasting toil amidst squalid wretchedness and abject misery: but the fascinating title of "Doctor" is ever sounding in his ears, and drowns the piercing cries of hunger and of misery. Who would not be a doctor?

The next class is the rather better-informed *General Practitioner*, who contrives to pass his examination by dint of grinding and cramming. As a student, his energies are chiefly directed to the physiology of low life, as displayed in the pot-house near his hospital, where he plays billiards and bagatelle, and imbibes half-and-half until the near approach of his examinations brings him to his senses, or deprives him of them altogether. He is seldom a man of education or ability—is generally the son of some prosperous trader, whose greatest ambition is to call a son—"Doctor." He practises among the poorer classes, and delights in unions and sick-clubs—he attends "low midwifery," which I presume is synonymous with "cheap labour." He is useful among the low population—is patronised by the shoemaker and the milkman—the huxter and the greengrocer—he is in great force with domestic servants, and a great gun with the stable frater-

nity. He is looked upon as a knowing doctor, and resorts to all kind of petty tricks to obtain practice.

The next class is the *General Practitioner* who attends the better description of practice. His qualification is the same as the last—but being the son of a rich tradesman, he is more consequential, and assumes a brusqueness of manner and vulgarity of language which his admirers denominate eccentricity. He is one of those men of whom "The Times" observes, "Society has always specimens—persons who are privileged to be free and easy, unmannerly and disagreeable. You meet a man whose form of salutation and address make you stare. You are rather perplexed, and do not know quite what to make of it, till you are told that, 'It is only Mr. So-and-so, and that you must not be offended, —it is his way.'" This class of persons is very apt to indulge in a sort of pride of privilege, in the idea that they can say what others cannot say; but the privilege of bad manners is a very questionable honour, a very dubious "feather in a man's cap."

These men are tolerated by the easy and better class of merchants and traders on account of their ample means—for with the rich trader, the poor and clever doctor finds no favour.

The next class is the really well-educated Scientific Doctor, who studies physic because he loves it, and not because *his* mother wants a doctor in the family—for she, poor woman, entertains a pious horror of what she calls "cutting and mangling." This man is of better origin—he distinguishes himself as a student, and confers benefits upon his profession when in practice. He is a man of mark among his brethren, and is patronised by the more educated and intelligent public. He is rarely well off, but always much respected. He has to fight his upward course with the vulgar, obtuse-feeling'd, and ill-informed man last described.

The next is the Fashionable Doctor, who is never a scientific man. He possesses ability, and a good knowledge of the world and its conventionalities. As a student he attends the fashionable hospital—spends his time in the parks and public lounges, and rarely in the dead-house or dissecting-room,—and when he does, he keeps his hands begloved, and his nose well lined with snuff. He practises among that class of society which despises everything connected with trade. He frequents the west-ends of towns—keeps a showy establishment and turn-out—attends the opera and concerts—is called "a v*aa*ry cleyva doctau" by the exquisite, and "a darling doctor"

by the gentler sex. He is totally unknown out of his own especial sphere.

The next is the LITERARY DOCTOR, who attends medical and scientific meetings — accompanies deputations to government — edits periodicals — makes speeches — dabbles in medical politics — writes for the medical press — and occasionally sends articles to the daily papers, the monthly journals, or the quarterly reviews. He is rarely a practical man, and seldom has much practice: he is the mouthpiece of the profession, and defends it with his pen. He often affects eccentricity of dress — occasionally patronises moustache and beard — sometimes luxuriates in long and uncombed hair — is generally negligent of appearances.

The next class which I shall mention is the PHILOSOPHICAL DOCTOR, who, although educated expressly for the practice of medicine, does not always pursue it. He sometimes takes chemistry under his especial charge — sometimes natural philosophy, or other branches of science. He acquires eminence, and sometimes European fame. He contributes greatly to the advancement of medicine, by giving his individual attention to those collateral subjects which the man engaged in practice cannot give. Science is much indebted to those men who have made invaluable discoveries the last few years.

I shall now briefly notice the *common* DOCTOR, *properly* so called, who signs M.D., and in doing so it will be merely to show how completely the public deceive themselves with those talismanic initial letters, M.D. They really represent, even at their highest value, only so much theoretical knowledge,—at their lowest value they are something less than worthless—for they may be purchased without even examination. They are usually the great ambition of young men, who acquire them *before* commencing practice—they therefore do not represent practical knowledge, but simply a few months' study of books and plates, and the outlay of a few pounds. The only degree recognised by the *profession*, as implying the possession of superior attainments, is the M.D. degree of the London University, which is a credit to this or any other country. The College of Physicians is a respectable degree, and the Edinburgh and Dublin Colleges also rank well.

How foolishly do the public dupe themselves by paying tribute to such worthless signs!—they will run away from an intelligent, experienced man, to put themselves under an M.D., who perhaps never underwent any examination at all.

The College of Surgeons and Apothecaries'

Hall diplomas are unquestionably the best guarantee for ability, *when combined*,—but if the M.D. of the London University be superadded, no better qualification can be had in the world. Never place any faith in the mere letters M.D., unless appended to some better title.

As a proof of what I say, let me instance the following case, which was told to me some years ago. A Wesleyan teacher, anxious to become a local preacher, submitted himself to the necessary examination, but was rejected as radically ignorant. In two years after, this disciple of John Wesley, by some means or other, obtained the title of M.D., and practised in the very same village in which, he was rejected as uneducated and incompetent for the cure of souls. It is notorious that the inferiorities of a family are selected for the church—but here is an instance of the rejected of the church being the accepted of a medical college. (?) Here is a man who, with two years' smattering of knowledge, establishes himself as a doctor, and even takes precedence in *public estimation* of experienced and qualified men. What shall we have next?

With men so variously educated and reared—differing in their mental qualities as much as in their physical constitution—practising a science

reduced to no fixed rules, and governed by no fixed laws—how can we wonder at differences of opinion existing among them? With things ever varying as seen through different media, how can we affirm that one is right and another wrong? Hence the old adage—

"Who shall decide when doctors disagree?"

Nothing admits of such varieties of opinion as a scientific subject—look at Palmer's trial, to wit. Here the lights of science clashed in the most remarkable manner. Men, whose unsupported testimony, a few short weeks before, would have consigned the prisoner to the fatal drop, themselves stood charged with error or with wilful blundering,—and that, too, by scientific men. But with men brought up from the inferior grades of society—moving in different spheres—educated differently, taught to look upon things differently, and upon each other *in*differently—we must expect discordant views and opinions, and the public should take these circumstances into consideration before condemning.

While speaking of the classes of doctors, I will take the opportunity to notice a very remarkable physiological feature in medical men, viz. the selection of their wives. The wife of a

medical man is as distinct a species of her sex as the doctor is of his own. She is generally not remarkable for her beauty, and makes no attempt to set herself off to the best; she dresses plainly —limply—and rather dowdily, as if she had lost the last spark of pride on entering upon her share of professional troubles. She has, poor thing! a careworn, disappointed countenance, as if she had shared all her husband's trials, privations, and sorrows. She is very little known, and appears cold, distant, and reserved; she approaches a stranger with an air of doubt, timidity, and hope—as if he might be either a new patient—or the tax-gatherer—or the friend of a patient, come to announce the fact that one of her husband's best clients had called in another doctor—or that Mrs. Smith could wait no longer, and had sent for some one else. In this stifling atmosphere of hope, fear, sorrow, and disappointment, do these amiable and devoted creatures spend a great portion of their lives.

They are often educated ladies—accustomed to the best society, and the enjoyment of every luxury. Doomed to early cares and trials, they soon become the depositaries of their husband's secrets, the participators in all his sorrows, and the media through which all bye-blows are dealt at him. By reason of their position, they neces-

sarily become acquainted with many of the vices and the secrets of their husband's patients, and ——start not at this frank avowal, for there must be a medium of communication between the doctor and the patient, and the domestic servant is not well suited for so delicate a task. Too much may be inferred from a note or message, a prescription or a medicine, to allow a mere servant to become the communicating medium. It is, however, chiefly the country surgeon's wife whose life is devoted to her husband's service, and not so much the London doctor's *lady*. There is this one grand trait in the character of the doctor's wife, and in which she differs most completely from her sex: no matter how infamously her husband may be treated—no matter what the provocation—and daily do we hear of the most cruel persecutions of medical men—never does this noble creature divulge the secrets of the prison-house, sweet as might be the triumph of revenge. A rose grafted on a thorn is emblematic of the doctor's wife. What other woman would submit, without a murmur, to the constant trials and hardships of a life devoted to every interest but her own—with a limit to enjoyment—a constant guard upon her tongue—all her little favourite occupations interrupted—her rest disturbed—her

very bed deserted night after night? What woman, did she but know beforehand the trials she must endure, would leave the lap of luxury to share the broken rest and thankless toil of that great public slave, the doctor?

While on this theme I cannot resist the temptation to record another example of *devotion*, in what is commonly termed "the doctor's trumpeter," or favourite patient; for what doctor has not his favourite patient? and that patient a lady, too! We need not suspend our breath while we record this simple fact—nor need we blush to place it side by side with the object of his devotion and his love.

There are many Florence Nightingales in the world who are not known to fame—who do their good by stealth; and what doctor has not one who sings his praise, and shares his toils, and shields his fame? How many doctors owe their whole advance in life to the warmth of woman's friendship, which never chills and never tires! A medical man can have no better friend and trumpeter than an amiable woman; and what man can so well appreciate the inestimable advantage of a woman's friendship as the hard-worked, ill-paid doctor?

Having thus, far too briefly, disposed of the ladies' claims, I shall now resume my sketches of

medical men, and describe their various orders, commencing with the WEST-END PHYSICIAN—a gentleman with whom, excepting in occasional consultations, the public are not likely to come in contact, for *his* services are reserved for the *élite* of society. The Consulting Physician sits in a gloomy library, surrounded by the insignia of his calling,—books—stethoscopes—test-tubes—spirit-lamp—microscope—and the latest numbers of the medical journals, or such of them as may have especially contributed to place him in his present proud position. If he have published a work himself—which is generally the case—you fail not to observe the precious tome, well thumbed, and carefully placed to attract the eye—a very pardonable weakness! In most of these apartments devoted to science you observe that prince of medical journals—the "Lancet," which has done more to raise the *status* of the profession than all the other journals put together—good and valuable as they are.

After waiting a considerable time in a gloomy anteroom, scantily provided with well-worn furniture, in company with an old and dirty number of the "Illustrated London News," and some half-dozen sickly, yellow-looking specimens of that biped man, keenly eyeing each other, and inwardly speculating upon the chances of pri-

ority, the door suddenly but noiselessly opens, and you find yourself addressed by a serious-looking gentleman of affable manner and extreme condescension, evidently assumed for consultation hours. You rise, and follow the speaker, who conducts you into his consulting-room—points you where to sit—puts sundry questions, such as, Who attends you? what is the matter with you? what have you taken? what colour and what taste was your medicine? &c.—and then requests to see your tongue, and feel your pulse; and while performing the latter office, he regards attentively the ticking dial of a large gold watch, as if expecting to receive some timely aid. He then commences sundry pantomimic antics on your ribs—lays his ear affectionately on your heart—tells you to hold your breath, or cough, or count—and then, with a grave mysterious air, expressive of profoundest thought and magic penetration, he stretches forth his hand, and draws within his reach a sheet of note-paper, on which he scribbles sundry cabalistic words, and parts of words, in a language only known to the initiated, but believed to be *a pure canine Latinity* — or mad-dog Latin—from its causing such a dread of swallowing when "faithfully dispensed." He now directs you as to *diet, exercise,* and *air*—hands you the prescrip-

tion—takes his fee—and politely bows you out and another in—cleverly combatting your every effort to propose the all-important question—"Doctor, what do you call my complaint?" You now find yourself in the open street, with a bit of paper in your hand covered with senseless hieroglyphics—your mind dissatisfied—your query of queries unanswered—the specific gravity of your pocket lighter by one-pound-one—and your spirits heavier than when you first approached with heavy heart and faltering step the doctor's door. You have, perhaps, to change your diet—to change your medicines—to change your air—to change your habits—and when you consult "*a popular celebrity,*" you find you have to change your surgeon too.

Now as to the query—What is the name of my complaint? There does not certainly appear to be anything very irrational in asking such a question; and yet it is very frequently a question which cannot be satisfactorily answered. Many organs may be affected simultaneously—one shall be most deranged to-day, and another to-morrow—but none sufficiently so to indicate disease. Under these circumstances one doctor may say *nerves*—another *bile*—another *heart*—another *spleen*—just as the more prominent symptoms may direct; while another, *more*

cautious than the rest, will give some compound Greek or Latin name, "full of *sound*, but signifying *nothing*;" and *he* will be *the doctor who knows the most.* And the more difficult the name may be to carry to the patient's home, the more will it be esteemed, and valued, and pronounced when once he gets it there. The fact is, that Nature's mysterious aberrations are not always designed for man to penetrate too easily. It often needs a process of inductive reasoning to arrive at any safe conclusion. It wants the aid of microscope and test—of ear and eye—of memory, judgment, and reflection. Never, therefore, be dissatisfied with a man who does not tell you pat the name and nature of your case, or give you some crank name which vanishes from memory's page before you reach your home. He who is too apt to give a name has often nothing else to give.

I will now bestow a passing comment on a medical novelty—the connecting link between the town and country doctor. The rail has committed shocking havoc with town practices the last few years. Many doctors have suffered most severely from their patients taking flight; and, as might have been expected, a new medical progeny has sprung up—an instance of spontaneous progressive development, com-

bining the essential requirements for the eccentric sphere in which it has to move — and possessing the especial faculty of subsisting equally well on town or country fees. Resembling the panting, puffing, noisy locomotive which originated the necessity for this spontaneous development, the *new Medical Hybrid* may be appropriately termed the LOCOMOTIVE DOCTOR; and his crest should be the sand or hour-glass, as representing his town and his country round at either end, and the communicating rail or road between; while the dust within is typical of his patients' end. This flying Esculapius chases his timid patients as a hawk pursues his quarry; they not only have no chance of escape, but thoughts of physic can never leave their mind—for the coloured lamps are everywhere they go. They no sooner quit the red bull's-eye lamp of town than they see it on the rail—and then again it meets them at their journey's end. Who can wonder that patients become converts to Homœopathy, were it only to escape the *sight of physic* and red lamps—those eternal—those everlasting red lamps—which make a railway station in the night suggestive of some grand calamity over which the Faculty is met in consultation!

Now let us inquire, What are the combined

advantages of practising in town and country? We have seen that it prevents the patient's escape from his London doctor. But is not this counterbalanced by the time lost *in transitu?* Certainly not: if a man know how to blow a trumpet well, it is a splendid opportunity to herald deeds of fame—to talk of titled patients—of strange diseases and their cure—to raise himself, and run his neighbour down.

But, even if he cannot blow the blast of fame, there is still an advantage in being *seen* and *known.* Picture to yourself a doctor on a railway platform amidst the gaping throng; you hear the *whisper* go the round—and in a quarter of an hour his name and fame have passed o'er many a tongue. Thus—

> "Good the more
> Communicated, the more abundant grows."

I will now direct your attention to the respectable GENERAL PRACTITIONER, who is the real stay and bulwark of his profession—who combines in himself the *physician,* the *surgeon,* and the *apothecary.* His studies are more extensive, and his examinations more full and searching, than the physician's or the surgeon's separately. He sees every description of case, from its commencement to its termination; he is, therefore,

competent to judge of the action and utility of remedies—and is in every way the safest and best man to entrust with human life. When the well-educated, intelligent general practitioner cannot stem the current of disease, it is folly to consult the mere physician.

The studies of the general practitioner—as we have already seen—often begin at the age of fourteen or fifteen;—he gains a tolerable practical knowledge of disease and its treatment before the physician *commences* his studies; and in many parts of the country—in mining and manufacturing districts in particular—the apprentice occasionally performs important surgical operations. Thus by the time he completes his studies and commences practice, he is a far more efficient doctor than the mere physician ever is. The physician's studies are chiefly literary until he has attained manhood, and his opportunities of studying disease are the irresponsible ones of *watching* the practice of some hospital or dispensary. Thus, often when the public are running mad after some "popular physician," he has never had a solitary opportunity of treating a single case of disease, from its commencement to its termination, on his own undivided responsibility. For instance, when a patient consults a doctor, he takes a prescription and pays a fee—

and, in the large majority of cases, the doctor never sees or hears anything more of the patient or the effect of his remedies. It may be that the patient goes to him three times for the fee —but what can a doctor learn of a case by seeing it three times? Again, the physician does not see the *acute* stages of disease (while the patient keeps his bed); he merely sees disease when it is recovering, and then only for a brief period.

To obviate these disadvantages, the physician gives gratuitous advice; but here, again, it is only to patients who are well enough to go about. The fact is, that the pure physician is very inferior in all that concerns the *practice* of his profession to the general practitioner.

To place against this glaring inferiority—the pure physician possesses a superior classical education, which is very captivating; but the absence of practical knowledge makes him a dangerous guide in illness.

But—talk of physicians—what can come up to that flourish of trumpets which ushers upon the public stage the JUVENILE DOCTOR, in the first act of that highly popular and oft-repeated drama the "Comedy of Errors," in which he performs a most conspicuous part during the first few years of his medico-histrionic life? Who cannot

call to mind the advent of some young practitioner —preceded by the trumpet-tongued announcement of his fame during the brief rehearsal at some London hospital—of the important part he has to play in after life? What doctor ever came upon the stage who had not been the brightest star of his hospital or school?—if we may believe his maiden aunt and doting mother. In fact,

> "Where yet was ever found a mother
> Who'd give *her* booby for another?"

The youthful doctor enters public life just as a rocket darts into the sky—with noise and flash —all eyes directed to his strange eccentric flight. He soars a time in regions of mid-air, and gives off coruscations numerous and bright—the dazzling admiration of the upturned village eyes. Having discharged "the atomic weights" which ballasted him, and the "chemical combinations" which gave such brilliancy to his grand ascent, he is reduced at last to his own "specific gravity," with which he falls again to earth—like the rocket's empty case, to be refilled with more substantial, less showy, and less explosive stuff.

No art—no science—no profession—no calling—can send forth such an extraordinary pro-

digy as the young doctor. He is an amalgamated mass of chemical symbols and decompositions—of atomic weights and theories—of microscopic specimens—botanic preparations—dissections—operations—diseases—and dog Latin—of certificates—credentials—testimonials—and diplomas. He is, in fact, *crammed* to the mouth like a carpet-bag, and *ground* to the finest point like a lancet. He looks the very impersonation of science, (?) and boasts of dissections—lectures—dresserships—and bloody operations, in which *he* took the distinguished part of wringing out the sponge and looking on. He exhibits the diplomas of the College and the Hall to curious friends and maiden aunts. He boasts that *he* can cure all the incurables in his native village, and sneers contemptuously at experience and old-established men. This is the man who holds the balance of our destinies—the privileged *by law* to lengthen out or cut the thread of human life, without accountability to man.

How often blind affection for our own leads to the sacrifice of human life! How many a trusting friend has been beguiled into offering up his life a sacrifice to youthful skill! How many parents—proud of the school-distinctions of a son—entrust their lives to his helpless inexperience; and it is only when the evidence of

approaching death alarms the minds of friends, that other aid is summoned to avert the fatal end. Week after week the village Esculapius receives the homage of the poor—the pity of the rich—and the most profound contempt of doctors far and near; but as the gloss subsides, the indignant mother, finding that her darling doctor's door is not beset with anxious crowds, vents her sore displeasure on the stupid world. She tells her friends what wondrous cures "our doctor" has performed, long *after* old practitioners had given the cases up. With the practice of his fascinated family, and the patronage of all the old stagers who employ each new doctor in succession and pay none—our juvenile hero consumes the first few years of his professional life, and—finding that the public do not take him at his own valuation—he softens down, and, in process of time, discovers what a smattering of knowledge is a young doctor's stock-in-trade.

He meets with difficult and dangerous cases—reverses and vexations—and is obliged to seek from time to time the assistance of the very men whom he despised and scorned. Having at length cut his wise-teeth and fooleries together, he gets into practice, and, in his turn, looks down with commiseration upon the next new doctor who comes upon the scene.

Having disposed of our young and inexperienced friend, we will view him in another phase of his medical existence — or, as commencing practice again after years of experience and toil,—and let us see how the world will use him then. As in former years, the first thing he does is to fix the brass plate on his door, and keep it bright. The next, to look for friends! What a strange delusion! Did ever mortal hear of friends encouraging a doctor yet?

He then observes, with scrutinising glance, the peculiarities of the people, and at length endeavours to obtain some public appointment. But who ever heard of a *public* gift that was not *privately* bestowed upon some friend of the parson, or *protégé* of the treasurer, long before the vacant office was announced? Thus is Hope defeated by the representatives of Faith and Charity.

He then appeals to family connexions; and here, again, is doomed to disappointment. Who ever patronised a doctor relative? especially if poor; and, if rich, who would seek to practise as a doctor? As a last resource, he tries the several introductions from his friends; but everywhere he calls, he meets with some rebuff. One will receive him coolly, while another treats

him as if come to kidnap her favourite doctor. The only persons from whom he receives attention are those upon whom he had no claim —those who are not trammelled by a clique, and whose vision is not *nasally* obscured. If, despite all obstacles, he rise and make a sensation in the world, his darling relatives will claim him as their own!

No men are so subject to the world's caprice as doctors. It is most humiliating to see a man of science at the mercy of a clique—to see him patronised or rejected by glaring incapacity or wealth—to hear him vilified by lisping lips—or see him thrust aside while some notorious mediocrity is summoned to supplant him. Even the decencies of social life are often outraged by his neighbours, strangers like himself, seeking the aid of some inferiority, whose carriage is kept waiting in vulgar triumph opposite his door. So much for the world's patronage of doctors!

A medical man, before commencing practice, should always ascertain the description of inhabitant. If he do not, and it prove to be of the lower and more uneducated class, deficient in the knowledge of the usages of society and the courtesies of life, the educated gentleman may write himself down as lost.

If, on the other hand, the type be the educated merchant or the gentleman, the inferior and uneducated practitioner may just as well take the brass plate from his door, for disappointment only awaits him.

We will next depict that very frequent medical event, the sale and transfer of a practice, and we shall do this while describing THE YOUNG DOCTOR WHO PURCHASES A PRACTICE.

He is usually introduced by what is called *nominal partnership*—a practical deception, which varies in duration from six months to three years—rarely longer than this. In the sale of a practice, the chief considerations are the *sum of money required*, and *the ability to pay it; the qualification to succeed to the practice* is not even entertained, except in advertisements, which occasionally announce that the applicant must be a married man.

Pecuniary arrangements being adjusted, the patients are duly made over, just as a hatter's stock—blocks and all, would be transferred to another hatter.

It is, in fact, a purely mercantile affair, from the beginning to the end; and were it represented as such, there would be no great harm in it: but the medical vender tells his confiding patients that he has met with an extraordinarily

talented young man, who is *far* superior to all the other practitioners in the town or village put together—that he has taken him as a partner on account of declining health—or being overworked, or some other excuse—and in this way nine-tenths of a practice are transferred to any *thing* or any one who can find the cash. But is it right thus to transfer patients who have honoured you with their confidence, without previously ascertaining that the gentleman whom you recommend is in every way worthy to be made the depositary of so much flattering confidence and trust?

Is there not something very reprehensible in this wholesale system of trafficking in human life? this transferring of respectable families from the experienced, tried, and practised man, to the theoretical,. untried youth? Does no responsibility attach to any of the parties acting in this farce? Does the father of a family imagine that he can honestly confide the lives of wife and children to the care of a man who knows nothing of their previous history, peculiarities, and susceptibilities, or what the public call their constitution? Assuredly he cannot, or why should families attach so much importance to their old and valued doctors? Even with a man of vast experience, much caution and discretion are re-

quired on *first* prescribing for a case of illness. Many people have the strangest and most unaccountable peculiarities of constitution. I know a gentleman who is invariably poisoned if he take the slightest particle of egg. It will induce the most alarming symptoms. In fact, his life has many times been nearly forfeited through partaking of articles of food not usually containing egg. I have seen a case in which the minutest dose of mercury in any shape would salivate in four-and-twenty hours. But instances could be multiplied, almost to infinity, of constitutional peculiarities; and yet young men, who have seen little or no practice, will boldly undertake to tend the lives of numerous families, comprising every age and every peculiarity of frame and constitution.

Is this right? Can it be right, suddenly to undertake duties which have grown up around a predecessor during many years, at the cost of much anxiety and thought?

It resembles an inexperienced youth taking a farm to reap its harvest, without knowing anything of the nature of its soil, its drainage or its capabilities,—without even knowing the nature of its crops, or how they found their way into the earth. He gathers the first crop well, because it was the growth of others' labour and

experience; but when he comes to till the land himself, he finds that its soil will not produce the same results. One field requires one kind of treatment, and another requires another kind of treatment, and time, and labour, and anxiety, are liberally laid out to gain the necessary knowledge; but during the earlier years, while experimentalising, his crops will droop and die, and his pocket has to pay for all this hard-earned experience.

Would that it were the same with physic, when unskilful men take practices they are not competent to manage; but, unfortunately, when the crops of human life sicken it is the doctor's gain. The contract for doctoring the poor of a parish was formerly—and is now, occasionally—called *farming* it, and it is a very applicable term in all but its pecuniary *bearings*.

However, *private* families have, I presume, a perfect right to do as they like with their own, or they would not do it. But can we accord the same privilege to those who have *public* appointments at their disposal, such as a union, a life club, a provident society, a dispensary, or a hospital? I think not. I think that in all public appointments the best man should be elected—it should not be a matter of "*favour or affection*," but of contested, earned, and well-merited right.

In France, if a vacancy occur in a hospital the most distinguished men enter the lists, and undergo a searching examination, and the *best* wins, and not the *richest* or the most *aristocratic*. Is it not hard, nay cruel, that the poor, the inoffensive, and the helpless sufferer, should be compelled to have an inexperienced man, or, as is usually the case, his unqualified assistant, simply because he purchased the succession to a practice? Such appointments are in principle the most *oppressive*, the most *unfeeling*, and the most *offensive* to our sense of *justice and humanity*, of anything connected with the medical calling. Is not life as dear? are not the affections as strong—the sympathies as acute—the attachments between husband and wife—parent and child—as enduring among the poor as the rich? Why, in the name of common charity, should their claims to our consideration in the selection of a surgeon be wholly set at naught? It is a censure on humanity to elect a man simply because he is rich enough to purchase another's practice. What have the poor to do with the friendship subsisting between doctor and poor-law guardian—or charity treasurer or other jack-in-office? Such men know about as much of a doctor's qualifications as they do of the "Wandering Jew" or the "Man in the Moon."

They read over those worthless bits of paper, called testimonials, as if they were "true *patents of nobility*," whereas they are, as every doctor knows, just so much trash. How many certificates of "very diligent attendance" upon lectures have been given to men who never attended one solitary lecture!

Let us inquire why such great efforts are made to secure for young men our public appointments? We know that charities are excellent schools for practice, but what makes them so? Is it not that poverty cannot be a chooser? Or is it that the poor and wretched are so indifferent to life that they will readily submit to be practised on by inexperience? I must leave those to judge who, like myself, have heard poverty tell its own tale. My own opinion is, that the reason such great efforts are made to get young surgeons into public offices is simply the difficulty they experience in getting into practice. There is an old saying, "*No reputation, no patients,—No patients, no reputation:*" it is one of those quaint sayings which we were accustomed to hear in what we now call our happy childhood,—one of the same category as "Not going into the water till you can swim."

Now, it is seldom that a young man *begins* with a reputation—he must begin with patients,

and reputation will follow: but how is he to get patients? for the public do not go, like *alchemists*, in search of the *unknown;* and professional etiquette distinctly says that the *unknown* shall not go in search of patients—so that all he can do is to put his name upon a brass plate, and then the name of his profession under it, and fix the same upon his door, hoping by its glitter to attract patients! But then the said brass plate only tells the public that a certain young man is a surgeon, or a surgeon *et cætera;* and the public, not knowing what *cætera* means, and not disposed to go in quest of the *unknown*, walks by and takes no notice. Common sense would indicate that our young surgeon should make the public aware of his intentions and pretensions, *i. e.* of his desire to practise upon *them*. But *etiquette*, that especial law of established men, says No. Thus, while the established man is driving about everywhere in a carriage, which serves as a brass plate upon wheels, "or as an advertising van," the young man is compelled by etiquette to sit behind that brazen barrier, which serves only as a barricade to professional advancement.

But what is the effect of this unequal law? Does it not lead to all kinds of underhand artifices? Does it not suggest to the young doctor, who has all the world before him, and perhaps

little left to begin it with, sundry little tricks and subterfuges which he would otherwise avoid?

I have always thought that the young aspirant to practice should be permitted to send his card to any and to every house—but *without comment.* How much better this would be, in every way, than pushing along in the dark—now getting to the wrong door—now into the wrong passage—but rarely into the right house—for as nearly every house is pre-occupied, an attempt upon it might be misinterpreted or misrepresented, which would enable his senior competitor to traduce his character.

Those who have not had the treat of reading Albert Smith's description of the election of Rawkins and Coops, will do well to purchase that inimitable antibilious production, "The Adventures of Mr. Ledbury." The description of Rawkins' election may be considered a type of all charity elections, except the union doctor's election—which is a strange exception to every thing else in this world—a thing *sui generis*, as doctors say. It is a farce in which *merit, talent,* and *experience* often stand pitted against *money, friends, family connexions,* and the influence of clique. The arbiters are men of every length, breadth, and thickness—of every shade of complexion and capacity, from the rubicund butcher

to the aristocratic country squire. They sit in solemn conclave in what is called a board-room, and call each candidate before them *in propriâ personâ*, take a brief survey of him, and a lengthy one of his testimonials, and then decide to elect *the very man* whom they had made up their minds to elect weeks before. Thus are all the other candidates put to unnecessary inconvenience to give a colouring of fairness to one of the most ridiculous farces ever enacted. But blame not the *dramatis personæ*, they are but players in the farce of life. Is not Cleaver the butcher quite justified in voting for the most *hungry-looking* doctor? Is not Whackstraw the farmer equally justified in voting for the doctor who keeps the most horses? And is not the *guardian* saint and pastor justified in voting for the doctor who most frequently calls for *his* "blessing before meat?" And why, again, should not the squire vote for the doctor who can give a vote in return?

Are we not all influenced by selfish or interested motives? Does not the farce really consist in placing the election of doctors in the hands of men who are by nature and habit more fit to judge of prize-oxen, oil-cake, or mangel wurtzel? and who form their estimate of doctors as they would do of the above *prize*able commodities?

Do they not go through a similar ceremony? Do they not inspect that black biped animal, the doctor—inquire where he was bred and fed—examine the certificates of the kind and quality of his (mental) food—how it was *ground* and *crammed* into him—and when, where, and by whom? Its effect upon him, and its results? Of course they do! and I firmly believe that they would elect the biggest, fattest, and sleekest doctor, were they not influenced by the above-mentioned self-interest!! So much for our old English system of election.

It is an admitted fact, that at these parish elections practical advantages will weigh as nothing in the balance against the influence of money and the huge roll of certificates and testimonials which are handed about, "in smart tin-cases," from butcher to baker—from farmer to tailor—from parson to squire—exciting in *their* minds a feeling of wonderment and admiration, but which would only draw a smile of pity from a professional man.

Young, inexperienced men, fresh from the schools, are always thrust forward as medical prodigies by their infatuated parents, relations, and friends, whenever a hospital or dispensary vacancy occurs. Every influence which money can bring into play is put to work to secure their

election; and if elected, what is the result? Ill-feeling among the medical staff—dissatisfaction and grumbling among the patients—desertion of the medical school by students, and public disgrace to the institution itself.

After the various classes and orders of the above-described, we have a great variety of genera, or *species*,—hence called *Specialists*, who undertake the treatment of individual organs. Thus we have *Eye Doctors*, and *Ear Doctors*, and doctors for the *heart*—the *lungs*—the *liver*—the *stomach*—the *kidneys*—the *nerves*, &c., &c., as well as for every *passage*, *inlet*, or *outlet*, and even for every special function.

Among these men we meet with the popular celebrities of the day—the popularities whom the public so delight to consult, and whose opinion is law. Men who circumscribe their vision cannot observe the collateral agents of disease. Nature is seldom so cruel as to vent all her spleen upon one organ, and let all the rest go free. She seldom strikes the heart or lungs alone. Disease generally hovers about and attacks various organs simultaneously; but usually some one—weaker than the rest—suffers most, and then, forsooth, it is handed over to the *specialist*, who punishes it as a naughty schoolboy would be punished, while

the aiders and abettors, whose tricks were accessory to all the mischief, escape scot free. There is no greater fallacy on earth than the faith in specialists.

What were the Baillies—the Hunters—the Coopers? Were they specialists? And what are Brodie, Bright, Lawrence, Coulson, Skey, Billing, Addison, Lever, Ramsbotham, and others, of the present day? Are they specialists? No, certainly not; and yet, who would not take their opinion in preference to the *specialists* on any and every subject? Look at the Consumption Doctors, with their cod-liver oil and their crowds of daily patients—what have they done? Is consumption less frequent? Is it better treated, or better understood? Is it less fatal? Is its detection facilitated since we have had these celebrated specialists? Certainly not. Laaenec has done more than all of them put together. *Spécialité* is all fudge—all gammon. The science of medicine has received its grandest touches from master hands—*not specialists;* and I shall be much surprised if it receive any improving touch from *spécialité.*

I am now about to make a few remarks on the next round of the ladder below *spécialité*—I mean Homœopathy, Hydropathy, &c. I am afraid to mention *Mesmerism*—for public apathy

has long consigned *it* to the "tomb of all the Capulets;" and had the medical profession treated all *hydra-headed quackery* with silence—absolute silence—we should long since have ceased to hear the word Homœopathy. It exists and subsists, at the present time, *merely* on the opposition of more valorous than discreet medical men. *Then why not let it die?* you will remark. —For the childish reason, that every one loves to fling *his* stone at it.

"As man, perhaps, the moment of his breath,
Receives the lurking principle of death,"

we may account for the natural instinct for doctoring so prevalent in all classes of society, but more particularly in the higher and richer classes.

Some patronise legitimate medicine, vulgarly called *Allopathy*, to distinguish it from what is called *Hydropathy*, and that microscopic humbug *Homœopathy*. This last pursuit of trifles is a comparatively innocent amusement; it is a small safety-valve which conducts away the high-pressure steam of doctoring, and prevents *trifling* with more potent and important remedies. It is the little star of benighted ignorance, which arrests the patient's step while danger passes by. But, in some cases, it may act as

a fatal ignis fatuus, by alluring and decoying into danger.

If this infinitesimal dosing be the true system of medicine, how is it that Nature has not instinctively led us to practise it at an earlier period?

> "Why has not man a microscopic eye?
> For this plain reason—man is not a fly.
> Say what the use, were finer optics given?
> To inspect a mite, not comprehend the heaven."

Homœopathy is inconsistent with reason and common sense. It is doubtless very fascinating to weak-minded people to be called in to doctor a neighbour's wife or daughter, or his ox or his ass. It is very imposing to be called "*Doctor*," —and the height of ambition to be sent for to undertake a *cure* (?) where a qualified doctor has been dismissed from a case before it was quite well, for *the express* purpose of giving *éclat to quackery*. Ladies learn homœopathy as they would botany—for the sake of employing the Latinised names.

Men become homœopaths just as a journeyman shoemaker becomes a local preacher—for ambition's sake.

Many excellent and amiable ladies amuse themselves with this miserable little delusion.

They talk about *potencies* and *dilutions* as if it were a *something* all-powerful, and required restraint, whereas it is a visionary *nothing*. It is like the Lilliputian lapdog held with a silken thread—it makes a noise, and shows its little teeth, and snaps, and strains, and stretches at its thread, while its pretty owner cautions you against the danger of its biting you. How often do ladies and gentlemen engross the whole conversation with this medical microcosm! They will dispute with medical men—catechise them, and give their opinions and advice, using all the time the everlasting *We do so and so, . We give so and so,* as if doctors themselves.

After talking of globules, and potencies, and such-like vapid nonsense, it is positively refreshing to approach the subject of hydropathy.

There is a feeling of refreshing comfort in having clean hands, and making a clean breast, and, in short, of walking about with a clean skin upon your back; but I very much question the propriety and wisdom of contravening Nature's laws by soaking the dry and shrivelled skin of age, as you would that of a faded pumpkin, or a withered pea.

Has Nature no design in drying up the mortal coil before 'tis shuffled off? Hydropathy is nothing but a deception practised upon age, to

make it appear young again—just as the orange venders soak their shrivelled fruit to make it fresh. Man is made up of cells, filled more or less with moisture during youth and manhood's prime, but shrunk and flattened in declining life by weight of years. Look at the withered branch—the faded flower—revived by dipping in the stream, merely to give semblance of vitality to withering life! And what is life but a perpetual antagonism to surrounding things? The strong vitality of youth resists the pressure of the air; but as old age creeps on, the vital powers grow weak, and can't resist the pressure from without. The cells grow flat—the distant channels of the vital stream dry up, and life contracts itself into a narrow space consistent with its failing strength. What folly, then, to seek to restorate the rounded form of youth—to spread the body's boundaries—to open up the flattened cells and dried-up bloodless channels, and start afresh life's purple stream, when the feeble heart no longer has the power to urge the blood along!

This unnatural soaking of the skin resembles dropsy from disease—it robs the vital warmth, and by its pressure checks "the genial current" of the heart. It is a dangerous experiment to act in opposition to Nature's laws. We can

habituate ourselves to almost anything *for a time;* but we must distinguish the tolerance of evils from vital laws. The use of water must be distinguished from its abuse; as a rule, it is not used half enough.

After the establishment and growth of the cold-water treatment, we had the *cold-earth movement,* so beautifully depicted in "Punch;" and, judging from the bills of mortality, I should imagine that this has been a favourite and prevailing treatment during the last few years.

We are apt to call everything quackery of which we do not approve, or in which we do not believe; but what is really and truly to be understood by quackery? Are homœopathy and hydropathy quackery? Certainly, as distinguished from legitimate medicine, they are open, bold, and barefaced quackery.

But there are many species of quackery, quite as profitable and quite as telling, which are daily practised by most respectable men; for instance, is it not quackery to tell a patient or his friends, that you were but just *called* in in time?—or to tell them that, if most medical men had been sent for, the patient would have died?—or to change the colour of the medicine or its taste when called in consultation? Is it not quackery to tell the world how very busy you always are?

—or what titled patients you attend?—or how completely you are fagged, and how *regularly knocked up?*

Is it not a species of quackery to be driving about on Sundays, when congregations are a-foot?—or to drive anywhere and everywhere, to show your carriage and your horse?—or to be sent for out of church or chapel?—or to keep gratuitous patients round your door for hours together?—or, when a friend is dining with you, invariably to receive a summons from Lord or Lady Someone?

Is it not a species of quackery to permit letters, extolling your skill, to be published in the newspapers?—or to publish cases in the journals, as if they were your own, while in reality they are your friend's or neighbour's?—or to so word *their cases*, when reporting them, as to make them *appear to be your own?*

It is quite true that these instances are not the sort of quackery which dances the tight rope of publicity; but they are, nevertheless, in my humble opinion, as much quackery as the filthy bills of *universal or secret curers*, which are posted up at every corner, and published even in the most respectable newspapers of the day.

I should define quackery as a series of sayings and doings, of a questionable shade and

shape, totally irreconcilable with *honesty's* notions of honour.

Having alluded to quackery, I will now direct your attention to some of the *Fallacies* of Physic; and one of the greatest is, *the unbounded faith in drugs*, and the *want of faith in those who administer them*, unless they be *old women*, *quacks*, or *clergy*. Now the faith in drugs is all very well, if not indulged to the exclusion of more important sanitary matters. More lives are saved by attention to diet, temperature, ventilation, and cleanliness, than are saved by physic. The great secret in the physician's art is to watch the aberrations and indications of nature, to promote or control those efforts, and to soothe and allay suffering.

If you hear a man boast of *his cures*, or lay great stress upon the value of drugs, you may safely doubt his competency to take charge of human life. Young men generally boast of the curative properties of this and that favourite drug; but only ask yourselves, why do cases get well under homœopathy, and every imaginable variety of treatment? Are they not nearly all nature cures or nature escapes? Most assuredly they are; and I firmly believe that nothing has done so much to foster homœopathy as the indiscriminate exhibition of dis-

gusting and loathsome remedies. The human palate, in a state of health, cannot conquer the aversion to disgusting physic—how then can we expect the sickened, nauseated stomach of illness, to accommodate the quantities of nasty trash, which too many physicians and practitioners thoughtlessly prescribe? I do not hesitate to say, that *any* and *every* case of illness may be just as well cured by inoffensive and agreeable remedies, as by the abominable trash so generally prescribed. Look at that filthy abomination—cod-liver oil; what has it ever done? what can it ever do? It is, as that acute observer, Dr. Billing, remarks, merely a fattening agent, just as oil-cake is to cattle. It may appear to benefit scrofulous cases by producing fat, and improving the general appearance; but in consumptive cases it is worse than useless. I am quite certain of one thing, from long observation, that it never yet saved life—that it never yet protracted life, *one single moment;* but that it has hastened to the grave many and many a case by inducing fatal diarrhœa.

I have seen it tried in hospital and out of hospital ever since its introduction into this country; and I can honestly and safely say, that *as regards disease* it is *worse* than *useless.* I can

imagine the violent outcry against these convictions—I can fancy hundreds of people asserting that they have *seen* it benefit and cure, and been cured by it; but these assertions are common to every hobby. Cod-liver oil is nothing more nor less than a gross *infatuation.* It may have served to plump up some puny scrofulous urchin, whom beef and mutton may have failed to fatten; but it never yet arrested the fatal termination of consumption by a single hour. I know that some of the "popular celebrities" recommend it in most cases, even now; but it is unquestionably going rapidly into disuse every year and every month, as such a filthy remedy deserves to do.

Doctor Cheating.

There are certain people who love to swallow gratuitous advice and medicine—who will avail themselves of the worthless prescription of some defunct doctor rather than consult a living doctor, and pay a fee—who will get a druggist to prescribe, or even prescribe for themselves, rather than pay a five-shilling fee to the family doctor—who will even condescend to solicit advice and accept medicine at our public charities. Ladies have been known to attend at hospital dispensaries, and even at the houses of doctors,

who give advice gratis, on purpose to avail themselves of bounties intended for the poor and friendless. Thus are medical men cheated, and the charitable funds of our excellent institutions misapplied. I except the unfortunate subjects of accidents, who in most instances demand admission into public hospitals, with a view to the best surgical aid; but this feeling is not so much a compliment to the skill of hospital surgeons as a reflection upon the surgical capabilities of private practitioners in and near large towns. Very few surgeons in London ever see more of surgical practice than what they see during their dressership or attendance upon hospital.

Another practice of Doctor Cheating very common, and often attended with disastrous results, is the system of consulting another doctor, without the knowledge of the one already in attendance. Thus perhaps, when a doctor is congratulating himself and his patient upon the improvement, he is suddenly and unceremoniously informed that the merit is due to another—that some friend had called and advised them to consult *Dr. Sneak*, and they had done so. But if the patient had been getting rapidly worse, and the doctor in attendance could not account for the why or wherefore, not a word would have been said of *Dr. Sneak's* attendance.

In this way I have known many lives sacrificed. But the blame is due to the Sneaks, who are well aware that a brother-practitioner is being duped and cheated, and yet participate in the unworthy trick for the sake of a paltry fee.

How frequently are medical men thus duped, without ever hearing or dreaming of it! What can be more cruel than to cheat a doctor who is making every effort to save life or alleviate suffering? The person who would thus impose upon his medical man deserves to fall a prey to some "*popular celebrity*," who would fleece him well. But the doctor who will unhesitatingly attend a case, knowing that a professional brother is being cheated and deluded, is a disgrace to his calling; and I am sorry to say, there are many such. It is to be regretted that the sneaking popularities, who are ever ready to play this underhand game, should be elected to fill our hospital appointments, which they obtain by imposing on the credulous and wealthy almoners of public patronage. But what can we expect, so long as hospital appointments are bestowed by our merchants and traders, without reference to talent or merit, and without consulting the medical body at large? Such a system must and does admit inferior men, who sink

at once the reputation of the charities and throw discredit on their schools.

The doctor-abusing public lead poor Esculapius a sorry life. He can do nothing right—he can say nothing right. They use his old prescriptions for new complaints, and blame him when they do not succeed. They represent him as killing all his patients, or sending them from home to die, when he can no longer get anything out of them. They misrepresent him—they abuse him—and yet *they employ* him! but always grumble at his bill. A word *en passant* about that bone of contention, the doctor's bill. The doctor usually charges according to his *status* in life and his experience; a man of forty or fifty cannot be expected to devote his time and talents to the public at the same rate as the juvenile. Again, the more mercenary and narrow-minded of the public always want to know for what the charge is made? And if it be for visits and advice, they invariably fall back on —"Why, I had but so many mixtures, or draughts," as the case may be; and if it be for medicine, they then tell you that they did not require one half so much. It is in every way more to the advantage of the patient to have to pay for visits and advice; and no general practitioner of standing and experience should charge

less than 5*s.* for a visit to a patient in easy circumstances. The young men should charge less; and that alone would give them a chance of practice.

The doctor-loving, doctor-patronising public, are the honest but injudicious admirers of the medical man. They are, however, at times very difficult to attend, and more especially after a favourite doctor. No matter how talented and superior the successor may be, he is arrested at every step with the cherished dicta and the cherished deeds of his predecessor. He cannot sit down to write a prescription but some old and treasured scrawl is thrust into his hand, with the intimation, "*This* is what our old doctor used to give." If he speak of diet, again the ancient oracle is invoked, and all his rules are given.

These men applaud and endorse *all* the doctor's sayings and doings. They employ him and recommend him on the most trivial occasions —they exaggerate all his cures—and by their overweening fondness for all things medical, they give an undue impulse to the already overdone and fatal art of drug-prescribing, which carries off more human victims than all our costly wars. It is positively fearful to contemplate the awful sacrifice of life from the indis-

criminate and injudicious use of drugs. To trust such potent poisons in the hands of young and thoughtless men, is simply patronising legal homicide. Another, but more innocent and amusing trait in the character of the doctor-patronising public, is the great encouragement they give to the puffing system in our daily press. They insert, or cause to be inserted, all kinds of wonderful cures and frightful accidents; and by some miraculous coincidence, it always happens that a particular—and, of course, always talented—doctor, was passing at the time, under whose able and skilful treatment the patient does well. A provincial paper was once affected with this puffing fever; and during its delirium always selected one particular medical man. If a carriage were overturned, this doctor was sure to be passing at the time—if a man's arm or leg was torn off by an agricultural machine, he was sure to be riding by—if a case of manslaughter occurred in a public-house or country inn, he was sure to have just called in TO SEE A PATIENT (?)—if a child were found drowned, he was sure to be returning home, and passing by just as the discovery was made. At length the public began to see through it, and it was discontinued.

There is no greater fallacy in physic than that

fatal clap-trap got up by the "Popular Celebrity," that "Two heads are better than one." It is a very rare thing that a patient is benefitted by multiplicity of advice. But how constantly is life sacrificed to doctors' quarrels—to their differences of opinion and of treatment! When more than one doctor is engaged they will ever be at cross-purposes. Each man thinks his own opinion best, and his treatment best—and how can you expect the family doctor faithfully to carry out a system which he don't approve? Hence the difficulty, and hence the danger. One *good head* is far better than a dozen heads, unless a patient's constitution be one of cast-iron mould, and wants a harder blow to break it up. But you will say, Are consultations to be considered useless? Certainly not. If you have a young and inexperienced man, and the patient be not doing well, never delay a moment in seeking more mature advice; *but*—always so arrange it with your doctor *as not to give offence.* The greatest reason why young doctors are averse to meeting older men, is the offensive way in which the preliminaries are arranged. If you have a man of experience and talent in attendance, wait until *he* suggests another voice—and I will tell you why. Every man of standing and ability feels a very natural pride in the successful

management of his case. If you call in another, from that moment his interest flags—he feels that his skill is doubted—his responsibility divided —and the credit shared by another. And as each will view the case differently, and wish to treat it differently, the result will be a compromise —a drawn battle—or the checkmating of the patient. Beside, the second opinion is always shielded by the first. You never hear the "*Doctor of Advice*" accused of doing wrong. If the patient die—it is always that the second doctor was not called in time. It is easy, then, to see the reason why there is so strong a feeling on the part of medical men to "other opinions," and to needless consultations. The desire for "*further advice*" rarely originates with the patient or his family—but almost invariably with a class of "*sick-room pests*," who are the doctor's veriest abomination; and who propose another opinion for the purpose of getting some favourite doctor sent for, or to annoy the doctor in attendance for some fancied slight. You cannot do a more offensive thing than recommend the calling in of "*other advice.*" It is a direct insult to the medical man in attendance, by implying incompetence; it is an indirect insult to the patient and his friends, by implying want of discernment in selecting a doctor; and —to say the most and least of it—it is a piece of

gratuitous officiousness which no one should ever perpetrate who is not prepared to pay the fee, and make an ample apology to boot.

In the course of thirty years I have known many a life risked and lost by doctors' consultations. Many will seek the doctors far and near for every simple case. I have known an infant of a few days old resist the combined attack of three physicians and one general practitioner—*but it was only for a few short hours!* And what was the motive, you will say, for such a little farce? Simply to cast a gilded halo round decay—to exhibit to the gaping world the power of wealth and the weakness of its possessor.

Consultations are far too common now-a-days—they are useful to young men of limited experience—they are useless to a man of talent, unless in some obscure complaint—and they are farces, or deep tragedies, according to the style of acting or the style of actors. To such a ridiculous pitch are consultations carried, that I heard of a young man of some two years' experience being sent for to meet senior practitioners,—for what purpose I cannot say, unless to fill up the patient's room.

The ordinary consultation is certainly one of the greatest farces ever enacted. It is a serio-comic performance, in which the physician plays

the principal *rôle*, the patients pocket the second part, and the family doctor does *the discount*. Let us imagine a case in which the "*oracle*" *is consulted*—one of those cases of daily occurrence in every town and village in the kingdom; and it will give you a good idea of the real value of all these petty farces. A gentleman is ill, and under the care of a competent surgeon; but some officious aunt or neighbour, who is not particularly well disposed to the family doctor, urges a consultation, and the following act ensues, with very rarely any variation in its scenes:—

The doctor is sent for, and arrives in all due state,—a chaise and pair at least. He is introduced by the family surgeon to the lady of the house, whose husband has the misfortune to be the object of all this silly ceremony—and after a few preliminary words with the medical attendant, aside, he is ushered to the patient's room, where the usual colloquial performance takes place, relieved by the inspection of the tongue, counting of the pulse, and tabbering of the chest; the interesting object of the ceremony being at an amazing premium for the time being, and the family doctor at a fearful discount. Seizing the first pause which ensues, the patient inquires what the doctor thinks is the matter

with him? as innocently as if the family surgeon had been a mute during his attendance. The reply is the approved and stereotyped reply for all such occasions, "We will go into another room, and talk your case over, and then see you again." The consultants are then ushered into a private room, and introduced to two well-filled decanters of wine, which stand upon a table surrounded with wine-glasses and flanked by an electro-plated basket of cakes, and a writing equipage with note paper, &c. complete.

The family doctor is requested to do the usual honours, and at the same time they are each requested to take what they like; and with this the door is closed, and an animated chat commenced upon the weather and the crops, or the politics of the day or place, being topics particularly suited to the patient's case. Before, however, they have well entered the field of discussion, and just as they have poured out a glass of port, and crossed their legs for a lounge, the door opens, and the maiden aunt enters stealthily to inquire *privately* what the doctors think? She is rather coolly repulsed with the usual phrase upon such occasions, "We are talking the case over, and when we have finished we will ring the bell." After three-quarters of an hour's happy

conversation, in which every doctor's practice in the village has been duly canvassed—the weather and the crops discussed—the patient's occupation, habits, and circumstances talked over—the quality of his wine approved—and the whole artistic, musical, and scientific world reviewed, sundry shufflings, whisperings, and other indications of impatience, are distinctly heard outside the door, which reminds the learned doctors of the object of their visit, and gives them a gentle hint to quicken their proceedings. "Well, now, what shall we do?" is the first question relating to the case. "Anything you like," is the reply. "Well, then, suppose we give so-and-so, and put a blister on his chest, eh?" "Very good," is the reply. "And I suppose we had better say that the case is not quite free from danger, but we hope that he'll do well?" And with this final proposition, and without waiting for the nod of assent, the bell is rung, and before the clapper could possibly have passed the summons on, the door is opened by the self-same lady who three-quarters of an hour before had been requested to retire.

She enters with important air, and loses no time in renewing her former question, impressing on the doctors how important it is that SHE should be made acquainted with their *real* opi-

nion, but that she shall be very guarded not to let any one else know.

This, of course, the doctors fully understand, and merely tell her just the same as they tell the wife, but in a more important and confidential tone, which answers every purpose. This farce performed, the doctors are again admitted to the patient's presence, who anxiously inquires, "Well, doctor, what have you made of my case?"

With a grave and suitable tone the physician informs him that they have had *a very long conversation about his case*—that they have gone over *all the symptoms carefully*—that they are quite agreed, and think that he is not entirely free from danger, but hope that what they have prescribed for him will soon bring him round again. He is informed that he must have a blister on his chest, and take a certain diet;—he is assured that everything proper has been done for him by his medical man, and that he is in very good hands. With great apparent warmth and kindness the physician takes his leave, and the two are then conducted to another room, in which the patient's better half awaits in "*golden sorrow*" the final scene.

After asking and receiving the doctor's opinion, she inquires in a winning voice, "*Doctor,*

what is your fee?" "Ten guineas, madam, if you please." With marked confusion and astonishment, which she vainly struggles to conceal, the lady dives her hand into the depths of a pocket privileged for the occasion to hold her husband's purse, and then repeats, "Ten, I think you said, doctor?" "Ten, madam, if you please." "Are they to be pounds or guineas, doctor?" "Oh! we are not particular about that, madam;" and with a smile of satisfaction and of triumph she observes, "Why you know, doctor, there are no such things as guineas now-a-days." The doctor admits the truth of this too oft-repeated remark, for the odd shilling will often pay his rent and taxes—so he pockets the fee and prepares for his escape with all possible dispatch, having overheard sundry allusions to some little boy and girl who are not *quite the thing*, and the hope that the doctor would give them his advice. The doctor, of course, is too good a judge to weaken the oracle by extending it—he therefore has another appointment, and not a minute to spare.

He knows full well, that when the oracle has been invoked the sooner the deity quits the temple the better. He has, moreover, heard the *sotto voce* soliloquy: "*Ah! my poor dear husband worked very hard for what he has, but we must not grudge it if it does but do him good!*"

The lady, who, before paying the fee, asked the doctor when they should see him again? now says, "Doctor, we will send you word if the patient gets no better." This finale is all that the poor family doctor could wish—he has been at an awful discount ever since the maiden aunt first mooted the consultation,—and now that the oracle has been worked, and its decision paid for, he rapidly rises to par, and then to premium.

Now, *wrong* as this farce may appear at first, *and it is literally true*, on reconsideration we must admit that it had its useful ends. It restored the confidence in the medical attendant, which the maiden aunt had woefully shaken, and it left the family doctor in quiet, undisturbed possession of his case, for the whole remaining period of the illness—since no other maiden aunt would be listened to who tried again to alarm the patient out of a ten-pound note.

But do not run away with the idea that every consultation is the same, that patients are cheated out of their money by the doctors—no such thing. The consultation I have described is the every-day one—the one originating in the officious interference of the patient's friends; (?) for which *he* has to pay instead of the *mischief-maker*. But when a case is difficult to treat and dangerous in prospect, and the family doctor advises

and wishes another opinion, the consultation is a widely different affair, and every justice which science and humanity can bring to bear is done to benefit the case. The medical attendant having urged the consultation, feels desirous that his patient should derive every benefit from the conference—*and I am sure he does*, most honestly and faithfully.

There is yet another species of consultation besides the two above—a consultation in which the Popular Celebrity takes part; and here cross-purposes are at work—the patient's welfare is made quite secondary to damaging the family doctor. A different feeling reigns throughout—insinuations and innuendos escape the "Celebrity's" lips. "What! not done so-and-so? Not tried so-and-so? Not seen so-and-so? Not heard so-and-so?" and then the "You have just sent for me in time—a day longer, and his life was gone!" Thus the chopfallen family doctor is doomed to see his *white* mixture changed to *red*—his *sweet* to *bitter*—his *pill* to *powder*—and himself in a few days changed for the "Popular Celebrity." How many a practitioner will recognise this sketch—for who has not had to meet a *Popular Celebrity?* Who has not played in the farce, "Two heads are better than one?"

As regards the fallacies in which the public indulge, none are more glaring than those connected with medicines and their virtues.

The prescription of one doctor shall do no good—nay, more; it shall do harm—and yet *essentially* the same prescription from another doctor shall do good and cure! So much for mental influence.

One patient will tell you every time you call that he is worse, until the very day that he resumes his occupation in a state of perfect health.

Another will ever tell you he is better, until the day he dies.

I have recently heard of a case of mental hallucination regarding the effect of medicine. It was a common case of ague, in which quinine was given several times a-day for weeks. The patient—tired of continuing the remedy, and impatient that he did not get quite well at once—yielded to the various recommendations of his friends; and some Crimean hero ordered him quinine—the very remedy he had been taking all the time—but given out of another spoon, its effect was, of course, magical. At length the complaint—worn out, and yielding up the ghost—was prescribed for by the village parson. The dose was *small*, and *black*, and *warm*. The ague, already tired of renewing its attacks, re-

turned no more; for there must be *a last,* even of an ague fit; and so the parson walked away with the palm of victory. Some time back a gentleman brought his son to town to consult the celebrated Marshall Hall. He had been an epileptic for some time, and the fits were frequent and severe. The Doctor recommended that the patient should occupy a lodging near at hand, so that he might be called on the first appearance of a fit. But day after day elapsed, and week after week flitted by, and yet no fit appeared; and the patient went back to his home quite *cured.* (?) Now, had the Doctor only *once* prescribed for this epileptic patient, he would have immortalised himself *at once.* So much for mental influence.

Although I have such an aversion to physic, when carelessly or thoughtlessly prescribed, yet I am far from considering it inert or useless. There are many diseases which yield at once to well-directed means; but there are others which are greatly aggravated or prolonged by treatment. There is one strange deception which people practise on themselves through their natural impatience to be cured. They will not give *one* doctor, or *one* remedy, a chance; but roam about consulting every one, and taking everything, until by *lapse of time* the complaint is

cured, and then the merit is accorded to the last prescriber or prescription; and, as is usual, the last prescriber is generally an "old woman," or a village clergyman.

This is the way in which so many thousands of *last doses* have had undue importance given to them; they are lauded to the skies; the world tries them, and they fail—as each and all had done before, and as each and all will do in future.

Medical men have few distinctions of which to boast, and those are not always the most suitably disposed. They are particularly tenacious of their title of Esquire, which universal courtesy so readily accords. The omission of these *very-much-used letters* was considered such a mark of insult and discourtesy some short time back that it gave rise to a serious fracas, which became the subject of magisterial investigation and public ridicule. The doctor's education and position will always entitle him to rank with gentlemen; and by gentlemen I do not mean the *merely wealthy* Smiths and Browns. The worship of the golden fleece is England's greatest curse. For Gold, an Englishman will sacrifice honour, honesty, and principle. He will give short weights, short measures, and short change. He will adulterate every article he

sells, and mercilessly pursue his poorer neighbour unto ruin. He will harass with the law, and destroy credit, reputation, and respectability; and when the idol Gold is once amassed, the idolater sets up to be a *gentleman.* Why, by parity of reasoning, what should exclude the lucky swindler, or the wealthy convict, from the society of gentlemen?

Medical men have singular ways of giving *themselves* TITLES, since the government is not very profuse in distributing them. Thus one will sign himself surgeon to a *Friendly Society*— another to a *Provident Society*—another to a *Duchess* or a *Countess*—as if these little appointments were *medical titles.* Of what peculiar interest can it be to the public, or to the profession, to know that a man attends a friendly society, or a friendly duchess? They are merely his *private patients,* and by the same rule all aristocratic physicians might give the names of the great people whom they attend, who have handles to their names, until the "Medical Directory" would attain dropsical dimensions, and become more a guide to private practice, or to the diseased peerage, than to the qualifications of doctors.

Purely public appointments are different things —they are often useful as reference.

There is a weakness displayed by some portion of the public to which I must advert, as it is calculated to produce most mischievous and fatal consequences. I allude to the love of deceiving, and being deceived, regarding the nature of disease. Even in the most trivial cases the greatest anxiety is sometimes manifested to deceive. The husband *will* have his wife deluded, and her complaint misnamed; or the wife will ask you not to tell her of the danger of her child — assuring you that she would rather that the child should die without danger being mentioned. With some, again, the deception practised is in the *name* of the disease, with others in the examination necessary to detect it. Thus the doctor will be studiously cautioned not to breathe the words asthma, consumption, dropsy, apoplexy, or whatever the *tache noire* may be. I have known consumption steal on unobserved, and consequently unchecked, for fear the patient should be alarmed by an examination of her chest. There is a wide difference between unnecessarily frightening patients or their friends, and keeping them in total darkness of the real state and prospects of the case. A doctor who consents to trifle with his reputation to please the patient's friends deserves to damage or to lose it, as he undoubtedly will do

should death occur. For, as sure as fate, the husband, the father, or the friend, will soon turn round, and bitterly upbraid him with neglect of duty. And what is more "bitter in its hate" than the deceived—the disappointed—or the discontented patient? How cruelly he rails against the poor offending doctor who last attended him!

Medical men should be extremely careful not to join in this abuse of their brethren, for *their* turn will most assuredly come next. A doctor may safely lay down the rule, "that the patient who has been to many doctors will yet go to another:" he, therefore, cannot be too careful how *he* comports himself; and should make a point of defending the attacks upon his predecessor's reputation, as if they were made upon his own. Some patients evidently think, that to run down the last doctor who attended them is to win the good will, and ensure the best efforts of his successor, by flattering his vanity and ministering to his egotism; but if they have an honest man to deal with, they will soon discover the mistake: for a cautious man will even be more cautious how he gives such a patient an opportunity of traducing him when his turn for dismissal comes.

I will now take leave of my brethren the doc-

tors, and our friends the public, with the sincere wish that my remarks may open their eyes to the present baneful, cruel, and unjust system of selecting and treating medical men. These sketches represent a large portion of the medical body, and a still larger portion of the public. Like policemen's boots, they will fit more than one member of the force, and many a doctor will think them made upon his own especial *last*. They are, however, not intended to be portraits of individuals, but illustrations of a system in which whole classes and orders figure. If there be a profession which, more than all others, should be encouraged according to its real and intrinsic merits, it is the medical—and yet we find it encouraged in a direct ratio with its most superficial traits.

As the law *now* stands, there is every conceivable and inconceivable variety of doctor, from the first-class scientific man to the common quack. Is it not, therefore, singular, that it should be so fashionable to *abuse* doctors, and especially *provincial* ones, when it is unquestionably the fault of the public if they do not suit themselves? The country town possesses every variety of doctor, except the *two* extremes. It only lacks the *West-End* notability and the civic "popularity." And what do plain pro-

vincials want of the aristocratic West-End man? or the "popularity" of town?

They require a man versed in every department of his calling—equal to any emergency—and not men who attend one class of person only, or one disease only. Let provincials try to renounce *fashion*, where human life is at stake. It is not necessary, as in town, to exclude a man who visits you on foot, or in a hackney cab, lest your envious neighbour laugh at you. The simplicity of country life is outraged by the chaise and pair.

The men of real station in the world shake off the follies of a London life when they seek the country for its rustic charms—*they* manage to content themselves with such doctors as the village may afford; but it may be said that *their* greatness is exhibited in town, while the London merchant has only room to shine when staying at his country house. Thus *ambition* may account for all; but "ambition should be made of sterner stuff," and not take pride in the humiliation of the poor and hard-worked village doctor. Doubtless, many a gossip is got up against the country doctors merely as an excuse to have the *chaise and pair* from town. It is something *important* to possess a life more valuable than your neighbour's, and it shows discernment to

be able to detect a village doctor's failings and short-comings; it argues the possession of a brighter intellect than that which emanates from the vulgar crowd, who employ the much-abused and much-derided village Esculapius.

Let me exhort you to exercise the principle of simple justice and common sense in your selection of a doctor, and you will rarely have occasion to abuse the country surgeon. Ascertain first what you want, and why you want it; and then send for it, abide by it, *and remunerate it properly.*

If, then, you want a doctor to save life, do not send for a carriage and pair without regard to what is in it.

If you want a carriage and pair from the fashionable street or square, because it daily stands before a ducal gate, send for it by all means, but do not blame its owner if you nearly lose your life.

If you want plain Dr. Jones, why, do not send for Dr. Brown, and blame the latter if he make you worse.

If you want a scientific man, have him at once, without regard to what he wears, or what he drives, or who drives him; and do not send for a fashionable mediocrity, who prides himself on tightly-fitting boots, and spotless gloves, and

matchless coat, but who would raise his nose to heaven at the odour of disease.

The following aphorisms may be deduced from the foregoing pages:—

Send for whom you want, and what you want —and not for whom and what you do not want —simply because your neighbour does so, or because it is fashionable.

It is not invariably the oldest doctor in a town who is most experienced, or most to be relied upon.

Fine carriages do not always contain clever men.

The doctor who is fetched from church to see an *apocryphal lady* is not to be trusted—he is *too weak* a man to make your confessions to.

The doctor who *drives* everywhere, does so that the public may *see* what patients he attends.

Doctors who enjoy the cream of practice do not all deserve it.

Some doctors in large practice have a milk-and-water aspect; it is, *because* they skim the cream.

A fool may purchase a practice, but he cannot purchase judgment and experience with it.

The doctor who cuts a dash is not always a

Solon; nor is the poor man who walks always a *Midas.*

Ability is not essential to getting on in practice, as you may convince yourselves by merely opening your eyes.

Do not be deterred from sending for a doctor by the abuse of the ill-conditioned, the vulgar, and the low, for anything respectable is sure to incur *their* ridicule and wrath.

Doctors were not all educated to the profession because they were suited to it, but because their mothers wished it.

It is morally criminal to employ a doctor to your wife or children without ascertaining who and what he is, and what he *knows.*

When a doctor trusts too much to physic, it is because he has not brains to trust to.

When a doctor's carriage is for ever near a railway station, the doctor is looking *out* for a patient, and not looking *in* to see one.

"*Two heads are better than one,*" is a fatal fallacy, if both are hard. If one be soft, it is not of consequence, for the softer must give way.

The letters M.D. are a delusion and a snare, unless grafted on some other and some *better* title.

Medical men always speak disparagingly of medical opponents.

When you hear a medical man spoken of disparagingly or disrespectfully, you may be sure that he is a dangerous opponent to some other doctor, and that you are listening to that doctor's friends.

People seldom speak ill of those who do not stand in their way.

When "London doctors" are sent for to a country village, it is not so much to see a patient, as to see the "*villa residence*," and the *boy in buttons*.

It is always wise to keep to one doctor, and always dangerous to roam about the medical *thicket*.

Nature is the real doctor—man her auxiliary.

As a rule, the general practitioner is the safest doctor to employ.

The experienced man is always safer to employ than youth and inexperience; for the most obvious reasons.

Hospital doctors in this country are not necessarily *all* clever men. They are not elected for their brains, but for their family influence; whereas in France they *must be clever men*.

Nothing is so base as ingratitude to a medical man.

Paying a doctor's bill does not always expunge an obligation.

It is wrong, cruel, and unfeeling, to shake a patient's confidence in his doctor, especially when it is merely done to recommend some favourite noodle, whom *you* imagine clever, but *no one else* does.

The only way at present for strangers to ascertain who is clever and experienced, is to ask of scientific men.

Never seek the opinion of another doctor, without the knowledge of the one attending you —it is unkind, *sneaking*, and *unjust*.

Never let pride or prejudice stand in the way, when life is at stake.

Never quarrel with your doctor till you have paid his bill, and then you will not differ.

Never trust life to your young and inexperienced *son*, simply because he is a doctor. Remember that he was his mother's choice, and not the child of science.

Remember that *every* mamma's son, who is a doctor, was once the *star* of his hospital or school—if we believe the chronicles of his family.

Avoid calling in another opinion, unless *requested to do so* by the doctor in attendance.

Avoid the men who dash about on Sundays while congregations are going to or leaving

church: for they are either very weak or very over-worked.

Avoid, above all things, the farce of consultations; remember, they are costly, useless things.

Never urge a young man's presence at a consultation with his seniors, unless the case be *his own;* for he cannot give his opinion *without* being asked, and he is sure *not to be asked* for it.

Always give a preference to a respectable man of practical experience—who does not cut a dash, or resort to petty tricks to attract your observation—one who is modest and moral—virtuous and religious—educated and scientific—cautious and careful—kind and attentive—patient and sympathising—prompt and persevering—or one who possesses as many of these qualities as possible. Select him without regard to the style of his carriage or the colour of his livery, and without regard to the spiteful gossiping of his jealous enemies or opponents.

I shall conclude with a few of the disagreeables attendant upon commencing practice—"a stranger among strange faces."

If a doctor commence practice—a stranger—the other doctors all stare at him, and the doc-

tors' friends frown upon him, as if he had no right to practise there.

If he seek a public appointment, he finds that it was privately promised to some one else, before *he* heard of it.

If he deliver letters of introduction from his friends, he is told, "We do not want a doctor;" or, "We do not think of changing;"—as if he intended *kidnapping the "family doctor."*

If he be rich, he is addressed *Esquire;* if he be poor, plain *Mr.*

If he keep a carriage, he is *clever;* if he walk, he is *no one.*

If he get into a railway carriage, he is, as sure as fate, to hear,—"What a set of doctors they are in the town in which he dwells!" one exclaims,—"They should not attend a cat or dog of mine!" while the others endorse the stereo'd phrase.

If he commence practice on the recommendation of his friends, who tell him "what an opening there is," he is sure to find that *they* employ his most ignorant opponents, or send to town for some obscurity—because, forsooth, they do not like to have a relative.

If recommended to the public, they say directly,—"Why don't his friends employ him?"

If he attend the High Church, he is a *Papist;*

if he attend the Low, he is a *cant;* if he attend a Dissenting Chapel, he is a *hypocrite;* if he stop at home, he is an *Atheist.*

If, at length, he is sent for to a patient, he is sure to find that some Jerry Sneak, under Religion's cloak, has called to recommend another doctor in his stead.

If he put a *brass plate* upon his door, he cannot get wherewith to keep it bright.

If a patient in whom he takes especial interest be doing well, he is reminded that "two heads are better than one;" and another doctor is invited to assist (?) him in the case.

If he have been particularly kind to a patient, he is sure to find another doctor in attendance the next illness.

If he congratulate a patient on doing well, the chances are he will be told that *Dr. Sneak* has seen the patient on the sly.

If he see a patient often, he is a very clever and attentive doctor; but when his bill goes in, he is paid and thanked — but never sent for more.

If he be well educated and experienced, the public rarely find it out. If he be below par, they raise him to distinction.

"If he start in a fair field, and make way in it for some time, he is never certain that he may

not be beaten out of it by some more fortunate rival of after-appearance, whether in the form of a less competent, but more plausible and winning practitioner—or of some ex-shoemaker, or ex-footman, or ex-nurse, who may have assumed the sacred garb of an Æsculapian priest to dazzle the eyes of the vulgar."

"If he look to the *State* for protection of his just rights, he finds that the State has delegated this duty to *the very corporate bodies* in whom he has been enrolled."

"If he turn to these corporate bodies, it is uncertain that they will listen to his prayer at all; and if they do, it is doubtful whether they will protect their adopted son."

If he be a man of matured experience, he will see the young, the rich, the plodding and the dull—the men who have purchased a reputation or inherited one—thrust before him, and encouraged by the very persons who most loudly exclaim against the "country doctor's incapacity."

"There are besides, whom powerful *friends* advance,
Whom *Fashion* favours—*person, patrons, chance;*
THUS MERIT SUFFERS,—while a fortune's made
By daring rashness or by dull parade!"

NOTES.

I.

WHEN pages 25 and 26 were in type I was not aware that those universally respected surgeons, Mr. Martin of Reigate, and Mr. Daniell of Newport Pagnell, were entitled to share with Mr. Propert of London the honour of founding *the Royal Medical Benevolent College.* I therefore hasten to supply the omission; for we have so very few medical philanthropists among *the class who* CAN *afford to do good,* that it is a pleasing duty to record "the few—the happy few—the band of brothers."

In sharing the honour with Mr. Propert, it does not detract one iota from that gentleman's well-deserved fame, but rather adds additional lustre to it, from the fact that his co-philanthropists have long been endeared to their professional brethren by their unceasing and untiring efforts to promote the very object which Mr. Propert's high position and systematic exertions finally accomplished. The medical man who devotes his life to the public

weal, and who can rarely lay by sufficient for the wants of his family until that life is far advanced into the "sear and yellow leaf," ought not, upon his *deathbed*, to feel one single pang regarding the maintenance of those whom he leaves behind; far less should he have to bequeath to his survivors misery, want, and the marble hand of charity. It is to spare such heart-rending contingencies that the benevolent College is founded; and the public will do well to remember how strong are its claims on their generous support: for it is not a comfortable, contented bantling, fed by the superfluous wealth of city guilds, but a lean and hungry, half-perfected child—still craving for the scanty sustenance drained from the breast of sorrowing humanity—and making fitful growth whenever more substantial nutriment is given it by the hand of charity. Would that some still more generous hand would hasten its maturity, or complete its *growth!*

II.

I have laid great stress upon a class of doctor whom I designate the *Popular Celebrity*. That graven image, carved by *public hands* out of *nothing*—"out of which *nothing comes*." That idol,

animated by the public breath, and stuck up in every temple devoted to charity and suffering — worshipped, extolled, recommended, and consulted by the public, who offer up their lives and fortunes at its shrine, until their idol becomes transmuted into *gold*, and every knee is bent before it. But, kind reader, do not mistake the idol fashioned by *your* hand for the *professional* celebrity fashioned by the hand of Science, who is incessantly improving your moral and physical condition by discoveries, observations, and experiments — tending to better ventilation and drainage — to detect and check the sources of disease — to bring to light the adulterations of food and drinks — and to exposé to the world's glare the hand of the secret poisoner.

I cannot, if I would, name any one of your idols, for obvious reasons; but I may, perhaps, be pardoned for illustrating by a few names the class I am anxious to contradistinguish from them. To mention all would fill a volume; but such men as Ballard, Birkett, Critchett, Cock, Erichson, Fergusson, Guy, Gull, Hilton, Hassall, Letheby, Luke, Oldham, Paget, Quain, Rees, W. B. Richardson, Reece, G. Ross, Todd, Ward, &c., &c., may serve as examples, and prevent *Professional* Celebrities being mistaken for *Popular* Celebrities.

III.

My observations about the "Lancet" at page 72, have reference to its gigantic struggles with hospital monopoly and corporate abuses, and not to its literary excellencies.

Those who can remember the first appearance of this periodical can doubtless remember also the terror occasioned by it.

It *sprang* into existence; and, like a volcano, threatened to overwhelm or sweep away everything medical which did not at once *move on.* It appeared, moreover, at a time when its prototype, the bleeding lancet, was in all its glory—when physicians never wrote a prescription without putting in one of its corners the mysterious letters "V.S.," which meant that the patient must pay the penalty of his temerity in his life's blood. It arose in those days when pale faces, swollen features, and dropsical limbs proclaimed the lancet's handiwork—when the economy of hospitals was a secret known only to a select few—when lecturers taught their pupils just when they liked, how they liked, and what they liked; and would not permit their lectures to see the light of day—when students were found on stage-coaches as guards—at "public offices" as defendants and "accused"—in the streets as rioters—in the lecture-room as stable-men—in the hospital ward as jolly, rollicking fellows, ripe for a "lark"

or a "bit of chaff" with a churlish patient—in the dissecting-room full of practical jokes on poor crumbling humanity—when the resurrectionist was as valuable as a prime minister—and murder, "foul and unnatural," provided *matériel* for the student's knife. These were the days in which the "Lancet" began its huge reforms: when hospital appointments were all but hereditary—when they regularly descended from sire to son—from uncle to nephew—and when to have murmured would have been worse than sacrilege. In those days, when the medical horizon was dark, and students were guided by that will-o'-the-wisp—*Old-established Custom*, the "Lancet" appeared as a bright luminary, throwing its *unwelcome* glare into all the dark recesses—making monopoly stand out in *low* but bold relief. It roused the lazy to their duty, and made the *incapables* tremble. Before its light, jobbery halted and staggered; and treasurers, committee-men, doctors, nurses, beadles, and porters were alike on the *qui vive*—each in turn anticipating a weekly bleeding from this little instrument, until his constitution was improved, and his functions performed more regularly. And how anxiously did the public and the student look out for these periodical attacks, which were considered salutary crises for such chronic complaints! In eulogising the "Lancet," I do not profess or desire to justify all the wounds it inflicted in its desperate struggles to eradicate such a

mass of old-standing disease. It is next to impossible to cut out a *large* and *hardened* tumour, or remove a *lump of proud flesh*, without giving pain; and the feeling surgeon ever deplores the necessity for wounding the sound parts while removing the diseased; but he reconciles the terrible necessity by reflecting that it is for the good of the whole body. Much as the "Lancet" has done for the improvement of hospital management by the abolition of nepotism, and the introduction of what are called clinical (or bedside) lectures—much as it has done to improve the examinations for degrees and diplomas—to curtail the period of apprenticeship—to introduce assistant-physicians and surgeons to our hospitals—to improve the manners and habits of students, and the condition of military, naval, and poor-law surgeons—yet much remains to be done; and the "Lancet" is no longer single-handed in the field, but has to share the spoils of victory with a host of other well-conducted journals.

In the next edition of this little work I shall have much to say upon the present system of hospital elections, as well as upon other topics interesting to the public at large; for, after all, the public have the greatest interest *in the quality of doctors and the mode of distributing Hospital Appointments.*

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